

## County Borough of Southend-on-Sea

# ANNUAL REPORT

ON THE WORK OF THE

## PUBLIC HEALTH DEPARTMENT

FOR THE YEAR 1933.

BY

## CHARLES GRANT PUGH,

M.D. (Lond), B.Sc. (Lond), D.P.H. (Camb), M.R.C.S. (Eng), L.R.C.P. (Lond).

Medical Officer of Health & School Medical Officer.

Medical Officer of Mental Deficiency Committee, Etc.





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## County Borough of Southend-on-Sea.

#### HEALTH COMMITTEE.

November, 1933 to November, 1934.

Mrs. Councillor M. Broom (Chairman).

The Mayor (Mr. Councillor H. E. FRITH).

Mr. Alderman H. A. Dowsett, J.P.

Mr. Alderman S. F. Johnson, J.P.

Mr. Coun. W. BRAY.

Mr. Councillor F. CAUSE.

Mr. Coun. O. H. Cockrill.

Mr. Coun. W. B. HAWKEN.

Mrs. Coun. C. LEYLAND.

Mr. Coun. F. J. Lockyer, O.B.E.

Mr. Councillor J. J. SULLIVAN.

H. W. Cooper, Esq., J.P.

Dr. L. Gordon Hopkins, J.P.

Mrs. E. Quantrell.

#### SANITARY COMMITTEE.

November, 1933 to November, 1934.

Mr. Councillor A. A. Butterfield, J.P. (Chairman).

The Mayor (Mr. Councillor H. E. FRITH).

Mr. Alderman J. E. MEACHEN, J.P.

Mr. Coun. H. CLINCH. Mr. Coun. W. B. HAWKEN.

Mr. Coun. H. R. HUGHES.

Mr. Coun. F. J. Lockyer, O.B.E.

Mr. Coun. W. J. Perrett.

Mr. Councillor C. J. Tunnicliffe

Mr. Coun. T. G. TYLER, M.M. Mrs. Councillor L. WARD.

### MATERNITY AND CHILD WELFARE COMMITTEE.

November, 1933 to November, 1934.

Mrs. Councillor M. Broom (Chairman).

This Committee consists of the Council members of the Health Committee, together with three co-opted members, viz.:— Mrs. P. BROCKBANK, Mrs. E. QUANTRELL and Mr. E. STONE.

#### MENTAL DEFICIENCY COMMITTEE.

November, 1933 to November, 1934.

Mr. Councillor W. B. HAWKEN (Chairman).

This Committee consists of the Council members of the Health Comittee, together with three co-opted members, viz:— Miss A. Delf, B.A., Mrs. E. Quantrell and H. W. Cooper, Esq., J.P.

#### COMMITTEE UNDER THE BLIND PERSONS ACT.

November, 1933 to November, 1934.

Mr. Councillor F. J. LOCKYER, O.B.E. (Chairman).

This Committee consists of the Council members of the Health Committee, together with Mr. W. Enever, elected by the Education Committee, and two co-opted members, viz:— Capt Le Page Agnew and Mr. G. Rose.

## PART I.

#### SECTION I.

## STATISTICAL SUMMARY, 1933.

Area—prior to extension	n on	Octobe	er 1st	• • •		7,083 acres.
as extended	• • •	• • •	• • •	• • •	• • •,	10,333 acres.
Number of inhabited ho	uses-	_				
Census, 1931 .		• • •		• • •		29,413*
Enumerated Septer	nber,	1933	• • •			29,659*
Number of unoccupied	house	S				
Enumerated Septer	mber,	1933			• • •	1,080*
Number of houses in co	ourse o	of erect	tion, S	epteml	ber,	
1933	• • •	•••		• • •	• • •	507*
Number of families or			_	_		
Census 1931	• • •	•••	•••			23,779*
Rateable Value, 1933	• •	• • •			•• ,	£1,319,326
Sum represented by a p	enny i	rate	• • •	• • •		£5,031
General Rate, 1933-34						10/2d.
Loan Debt—						
Electric Lighting,	Ligh	t Rail	lways	and ]	Pier	
Undertakings	_					£890,629
Gas and Water Und						
Works						£,119,698
Higher Education						£363,699
Public Health an						£1,453,720
purposes Housing						£371,359
			• • •			£,166,257
T done Translatice	•••	•••	• • •	• • •	•••	
	Total		•••		• • •	£3,305,362
Total Rainfall, 1933	•••					15.64 inches
Total Sunshine, 1933.						
*/[]						

<sup>\*</sup>These figures are in respect of the area prior to the extension of the County Borough on 1st October, 1933, by the inclusion of the Urban District of Shoeburyness (1,036 acres) and parts of the Parishes of Eastwood (1,384 acres out of 3,200 acres), of Shopland (202 acres out of 1,054 acres), of Great Wakering (160 acres out of 2,775 acres) and of North Shoebury (530 acres out of 1,103 acres).

## SECTION II.

## VITAL STATISTICS.

POPULA	ATION—			
	to extension of Borough on October		10	0 003
	nsus, 1931			0,093
Est	timated September, 1933	•••	12	6,074
Of B	orough as extended on October 1st—	-		
At	mid-year, 1933, as estimated locally		13	3,000
At	mid-year, 1933, as estimated by Regis	trar Gen	eral 13	2,374
LIVE B	SIRTHS—			
<b>3</b> .7		Male.	Female.	
	imber of legitimate births	645	621	1266
Nu	imber of illegitimate births	49	32	81
	Total Births	694	653	1347
	Total Births	094	000	1947
Ri	rth Rate per 1,000 Residents	•••		10.8
	egitimate Birth Rate per 1,000 Reside			.65
711	egitimate birtir Rate per 1,000 Reside		• • •	.00
STILL	Births—			
		Male.	Female.	Total.
Nι	umber of legitimate still births	22	22	44
Nu	umber of illegitimate still births			
DEATH	:s—			
3.7	1 ( 1 ,1		Female.	
	imber of deaths	705	854	1559
	eath Rate per 1,000			12.5
Pe	rcentage of total deaths occurring	g in P	ublic	40.4
	Institutions	• • •	• • •	42.4
Dootha	from processors and particulation			
	from pregnancy and parturition—omen dying in or in consequence of c	hild him	·h	
VV	omen dying in or in consequence of c	mid birt		1 000
		Bi	rths (Live a	per 1,000 and Still).
	From sepsis	2	1.4	3
	From other causes	5	3.5	9
				_
	Total	7	5.0	2

### INFANT MORTALITY RATE—

	All infants per 1,0	00 live	e births	3	• • •			42
	Legitimate infants	per 1	,000 le	gitima	te live	births	• • •	36
	Illegitimate infants	per 1	(li COO,	egitima	ate live	e births	S	111
Zyı	MOTIC DEATHS-							
	No. of deaths from	:						
	Measles	• • •	•••	• • •			• • •	_
	Whooping Cou	ıgh				• • •	• • •	4
	Diarrhœa and	Enter	itis (u	nder 2	years	of age)		5
	Scarlet Fever			• •	• • •	• • •	• • •	2
	Diphtheria	• • •				• • •		6
	Smallpox					4		_
	Typhoid Fever						• • •	-
	Total zym	otic d	leaths	•••	• • •	•••	• • •	17

The following table, based on that issued by the Registrar General, is given for comparison:—

... 0.136

Zymotic death rate per 1,000 population ...

	Annual 1,000	Rate per living		Percentage of <b>Total</b> Deaths				
	Live Births	Deaths from all causes	Deaths under one year to 1,000 births	Certified	Inquest	Coroners' Certificate	Uncertified	
England and Wales	14.4	12:3	64	90.9	6.3	1.9	0.9	
118 County Boroughs and great towns	14.4	12.2	67	91.0	6.0	2.5	0.2	
132 Smaller Towns	14.5	11.0	56	91.7	5.8	1.5	1.0	
London	13.2	12.2	59	88.3	6.3	5.4	0.0	
Southend-on-Sea	10.8	12.5	12.5 42		6.2	3.1	3.1	
						*		

#### Maternal Mortality Rate per 1,000 live births:—

					England and Wales.	Southend- on-Sea.
Puerperal Seps	is			• • •	1.79	1.48
Other causes	• • •		• • •	• • •	2.63	3.71
					-	-
Total	• • •	• • •	• • •		4.42	5.19
Maternal Mortality	Rate	per 1	,000 to	tal b	irths:—	
Puerperal Seps	is		• • •		1.71	1.43
Other causes	• • •	• • •	• • •	• • •	2.52	3.59
Total	• • •		•••	• • •	4.23	5.02

### PART II.

### PUBLIC HEALTH STAFF.

#### A. MEDICAL & DENTAL STAFF.

- 1. WHOLE-TIME.
  - (a) At the Health Office.
    - (i) Charles Grant Pugh, M.D. (Lond.), M.R.C.S. (Eng.), L.R.C.P. (Lond.), B.Sc. (London.), D.P.H. (Camb.), Medical Officer of Health, School Medical Officer, Medical Superintendent of the Borough Sanatorium and of the Smallpox Hospital, Bacteriologist, Medical Officer of Venereal Diseases Clinic, Medical Officer to Mental Deficiency Committee, Medical Officer to Blind Persons Act Committee.
    - (ii) Frank Ernest Ingall, F.R.C.S. (Eng.), L.R.C.P. (London), D.P.H., Deputy Medical Officer of Health, Medical Officer of Borough Sanatorium, Assistant Medical Officer of Venereal Diseases Clinic.
    - (iii) George Edward Basham Payne, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (London), M.B., B.S. (Lond.), Assistant School Medical Officer and Assistant Medical Officer of Health.

- (iv) Jeannie Kean, M.B., Ch. B. (Edinburgh). D.P.H. (Edinburgh), Assistant Medical Officer of Health, Assistant School Medical Officer, Assistant Medical Officer of Venereal Diseases Clinic. Acts as Inspector of Midwives. Commenced duty 16th September, 1933 vice Dr. Doris L. Durie (resigned).
- (v) George Norman Meachen, M.D., B.S. (Lond.), M.R.C.P. (Lond. and Edin.). Clinical Tuberculosis Officer.

#### (b) At Municipal Hospital.

- (i) Samuel Cieman, M.R.C.S., L.R.C.P. (Lond.), Medical Superintendent of the Hospital and Medical Officer of the Poor Law Institution. Commenced duty 6th June, 1933 vice Dr. Frank Newey (deceased).
- (ii) Frederick Newton Foster, F.R.C.S. (Eng.), M.B., Ch.B. (Leeds), Deputy Medical Superintendent.
- (iii) Henry Canwarden, M.R.C.S., L.R.C.P. (Lond), Assistant Medical Officer.
- (iv) Harold Leslie Whitchurch Beach, M.R.C.S., L.R.C.F., D.P.H. (Lond.), Assistant Medical Officer.

#### (c) Dental Staff.

- (i) Basil Crisp, L.D.S. (Eng.), Dentist, his work being mainly in connection with the School Medical Service, but also undertaking, when required to do so, the dental treatment of patients in connection with the Tuberculosis and the Maternity and Child Welfare Schemes of the Council.
- (ii) Edgar Crees Austen, L.D.S. (Eng.), Assistant Dentist.

#### 2. PART-TIME.

- (a) At Municipal Hospital.
  - (i) Ralph Norman, M.D. (Lond.), Consulting Physician.
  - (ii) Robert Harold Campbell, M.B., B.Ch., F.R.C.S. (Eng.), Consulting Surgeon.
  - (iii) The Tuberculosis Officer acts as Consulting Physician for Tuberculosis.

### (b) At Infant Centres and Ante-natal Clinics.

- (i) Ralph Norman, M.D. (Lond.), Medical Officer of Southend Infant Centre and of Southend and Leigh Ante-natal Clinics.
- (ii) Charlotte Shields, M.B. (Lond.), Medical Officer of Southchurch Infant Centre.

- (iii) Dora May Butler, M.R.C.S. (Eng.), L.R.C.P. (Lond.), M.B., B.S., (Lond.), Medical Officer of Leigh Infant Centre.
- (iv) Bernard Blaxill, M.R.C.S. (Eng.), L.R.C.P. (Lond.), M.B., B.Ch. (Cantab), Medical Officer of Shoeburyness Infant Centre.
- (c) At School Clinic.
  - (i) Daniel Davies Evans, M.B., B.Ch., D.O.M.S., Specialist Ophthalmic Surgeon.
- (d) As Public Vaccinators and District Medical Officers.
  - (i) Southend (East) District.—Frederick H. Emery, L.R.C.S., L.R.C.P.
  - (ii) Southend (West) District.—Thomas Jones Clayton, M.R.C.S., L.R.C.P.
  - (iii) Leigh District.—William Douglas Watson, M.R.C.S. (Eng.), L.R.C.P. (Lond), D.P.H.
- (e) Specialist Surgeon for Operative Treatment of Adenoids and Tonsils under the School Medical Scheme.
  - (i) C. Hamblen Thomas, F.R.C.S.

#### B. NURSING STAFF.

- 1. WHOLE-TIME.
  - (a) At Health Office.
    - (i) Health Visitors who devote 45 per cent. of their time to the School Medical Service, 40 per cent. to Maternity and Child Welfare, 10 per cent. to Tuberculosis, and 5 per cent. to Mental Deficiency Work.
      - Miss G. Hedger, State Registered Nurse.
      - Miss N. Hitchcock, State Registered Nurse, Certified Midwife.
      - Miss E. Prophett, State Registered Nurse, Certified Midwife.
      - Miss K. M. Burnett, State Registered Nurse, Certified Midwife.
      - Miss V. M. Crump, Certificated Health Visitor, Certified Midwife.
      - Miss M. Butcher, State Registered Nurse, Certified Midw'fe.
      - Miss M. W. Clarke, State Registered Nurse, Certified Midwife.

Miss E. C. Brooks, State Registered Nurse, Certified Midwife—vice Miss E. H. Sexton, resigned.

Miss I. M. Evison, State Registered Nurse, Certified Midwife—vice Miss M. Taylor, deceased.

Miss F. E. Jennings, State Registered Nurse, Certified Midwife.

- (ii) School Clinic Nurse.—Miss V. W. I. Philbey, State Registered Nurse.
- (iii) Dental Nurse.-Miss G. A. McNichol.
- (b) At Borough Sanatorium.

Matron—Miss F. Midgley, State Registered Nurse.

10 Staff Nurses.

3 Tuberculosis Staff Nurses.

10 Probationers.

(c) At Municipal Hospital.

Matron-Miss B. Wood, State Registered Nurse.

2 Assistant Matrons.

1 Home Sister.

1 Stster Tutor.

1 Night Superintendent.

2 Night Sisters.

14 Ward Sisters.

1 Theatre Sister.

14 Staff Nurses.

2 Massage Sisters.

2 Staff Midwives.

4 Male Nurses.

76 Frobationers.

2 Children's Nurses.

2 Dispensers.

19 Female Mental Nurses.

7 Male Mental Nurses.

#### 2. PART-TIME.

(a) At Tuberculosis Dispensary.

Tuberculosis Dispensary Nurse—Mrs. Rowden, State Registered Nurse.

#### C. OTHER WHOLE-TIME OFFICERS.

- (a) At Health Office.
  - (i) Sanitary Inspectors and Inspectors under Shops Acts.
    Chief Inspector, L. E. Edwards.
    Assistant Inspectors:—

J. H. Lott.

J. P. Clarke.

R. Drake.

D. J. Legg.

R. Greenwood.

L. S. Crowther.

W. A. Healey.

All these officers hold Certificates of the Royal Sanitary Institute as Sanitary Inspectors and as Meat Inspectors. The Chief Sanitary Inspector also acts as Inspector under Diseases of Animals Acts, Food & Drugs Acts, Shops Acts, Fertilisers & Feeding Stuffs Act, and Rag Flock Act.

(ii) Home Visitor for the Blind.

Miss N. Westby, Certificated Home Teacher.

#### D. OTHER PART-TIME OFFICERS.

(a) Joint Public Analysts.

Leo Taylor, F.I.C.

Douglas Thurlow Lucke, B.Sc. (Lond.), A.I.C.

(b) Veterinary Inspector.

H. D. Sparrow, M.R.C.V.S.

(c) Superintendent of Remedial Treatment Centre.

Miss R. H. Shepherd, Member of Chartered Society of Massage and Medical Gymnastics.

#### E. CLERICAL STAFF.

- 5 Male Clerks at Health Office.
- 4 Male Clerks at Municipal Hospital.
- 3 Female Clerks at School Clinic.

## PART III.

#### SECTION I. NURSING IN THE HOME.

The arrangements available were set out in detail in the report for 1930. Particulars of the work carried out by the Council's Staff of 10 Health Visitors in connection with the Home Visiting of infants, young children and expectant mothers are set out below:—

No. of infants noted for visiting (including	ng ne	w arri	vals	
from other towns)	•••	•••	••	1,434
No. of infants visited for first time in 1933	3	• • •	•••	1,339
No. of infants visited during 1933	.:.	• • •	•••	2,172
No. of visits to infants under one year				5.741

No. of children visited between 1—5 years		2,575
No. of visits to children between one year and five ye	ears	
of age	•••	5,449
No. of expectant mothers visited for first time in 1933	•••	553
No. of expectant mothers visited during 1933	• • •	614
No. of visits to expectant mothers		1,277
No. of attendances at Infant Clinic	•••	818
No. of attendances at Ante-natal Clinic		188

Of the infants visited as a result of receipt of notification of births, the number found to be artificially fed within the first six months of life was:—

- (a) From birth ... ... 92
- (b) Breast fed at first but artificially fed later ... 259

The visits of the Health Visitors to homes in which cases of infectious disease occurred were as follows:—

DISEASE	No	o, of ca	ises l		o. of ca me nur		No	of vi	Total	
	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	
Chickenpox	31	228			•••	• • •	56	322		<b>37</b> 8
Measles	19	42		1		•••	34	68		102
Pneumonia	13	11	75	2			28	34	106	168
Whooping Cough	67	69			• • •	•••	161	128		289
Scarlet Fever	66	244	34		•••		321	1158	170	1649
Typhoid Fever	1	1	1				- 1	4	1	6
Mumps	2	42	•••		•••	•••	4	62		66
Ophthalmia Neon- atorum includ- ing suspected cases	23	• • •			•••	•••	77	•••	•••	77
Diphtheria	9	18		•••		•••	10	66		76
Puerperal Fever	•••	•••	2	•••	•••	1	•••		3	3
Tuberculosis	2	52	139			•••	11	207	489	7C <b>7</b>
										/

<sup>(1)</sup> Infants and Children under 5 years. (2) School Children. (3) Adults.

The Health Visitors act as Infant Life Protection Visitors under Part I of the Children Act. Particulars of the work carried out during the year are as follows:—

Foste	er-mothers.	Children.
Number on Register on January 1st, 1933	88	152
Number on Register on December 31st, 1933	94	162
Number of Reception Notices received	* * *	259
Number of Notices of Death	• • •	2
Number of Notices of removal of children	•••	215
Number of Notices re removal of foster-mothers		
<ul><li>(a) To other addresses in the Borough</li><li>(b) To other addresses outside the Borough</li></ul>		10 5
Number of visits paid by Health Visitors	***	1238

At the end of the year, 28 foster-mothers had the care of more than one child, 13 having 2 children, seven 3 children, four 4 children, one 5 children, one 8 children, and two 10 children.

The Health Visitors also carry out for the Public Assistance Committee the visiting of children boarded-out pursuant to the Public Assistance Order. Particulars of the work carried out in this connection are as follows:—

					January	December	
				1	lst, 1933.	31st, 1933.	
Number of foster-mothers	•••	•••	• • •		24	19	
Number of children	• • •	•••	• •	• • •	41	29	
Number of visits paid by	the ]	Health '	Visitor	s		469	

#### SECTION II. PRACTISING MIDWIVES.

Midwives Acts.—Forty-four midwives notified their intention during the year to practise within the County Borough, but 12 undertook no cases, 6 undertook one case only, 12 undertook from two to ten cases only, while the number of cases attended by the remainder were as follows:—

11-20 cases	• • •		• • •	• • •		• • •	5
21-30	• • •	• • /	•••	. • •	• • •		6
31-40	• • •	•••	•••	• • •	•••	• • •	
41-50	•••	•••		• • •	• • •	• • •	_
51-60	• • •			• • •	•••		2
61-70	• • •	• • •	n • •		•••	• • •	1

Thirty-five of the Midwives also attended as maternity nurses at 291 confinements.

With one exception, all the practising midwives are trained, seven holding the licence of the London Obstetrical Society, the remainder holding the Certificate of the Central Midwives' Board obtained after examination.

The Inspection of Midwives.—The Woman Assistant Medical Officer of Health acts as Inspector of Midwives and paid 86 routine visits and 10 special visits during the year. Each Midwife in substantial practice was inspected at least once a quarter while others received visits occasionally.

One Midwife had to be suspended from practice on account of the occurrence of cases of Pemphigus Neonatorum in her practice.

> Her name had been on the Midwives' Roll since 1918 and she had practised in this Borough since 1925, but had had no cases of Pemphigus Neonatorum in her practice until the spring of 1931 when three of the infants delivered by her developed Pemphigus Neonatorum. She was allowed to resume practice after suspension for 14 days and disinfection of her uniform, appliances, etc., and no further cases occurred until December, 1932, when four infants in her practice developed the disease. The midwife was duly suspended from practice, and as she suffered from chronic nasal catarrh, was advised as to the use of a nasal douche, antiseptic snuff, etc. Her suspension was removed on January 9th, and no further cases of the disease occurred in her practice until the end of February, when three infants developed the disease. enquiry it was then found that she had a fortnight previously discontinued the use of the nasal douche, etc. which was significant seeing that during the period she was using the douche none of the infants delivered by her developed the disease. The midwife was again suspended and advised to consult a Specialist Surgeon

in Diseases of the ear, nose and throat as to the chronic nasal She was found to have anthral disease for which she received operative treatment and on April 13th she was permitted to resume practice on producing certificates from the Surgeon and a Bacteriologist that she could safely resume practice. August three other infants came under notice who had developed Pemphigus Neonatorum and on enquiry the midwife was found to be using a face-mask when in attendance on cases and adopting other precautions to prevent her infecting infants. She ceased to act as a midwife until October, but shortly after resuming practice a further case of the disease occurred which led to her again being suspended. In view of the frequency of the recurrence of cases in her practice and particularly the deaths of several of the infants who developed the disease, it was decided to continue the suspension until the end of November when, however, she notified the Council that she had decided not to resume practice for a year at least. In respect of her suspension earlier in the year, the Council awarded her the sum of Seven Guineas as compensation for loss of practice during her suspension.

The payment of Midwives' fees in necessitous cases.—During the vear the Midwife's fee of Twenty-six Shillings was paid by the Council in 17 cases of necessitous lying-in women. In one instance the balance of £1 1s. 0d. of the fee was paid. The expenditure incurred amounted to £23 3s. 0d. as compared with £11 11s. 0d., £28 14s. 0d. and £14 8s. 0d. in each of the three preceding years

The payment for Medical Aid for Midwives. — Medical Aid was sought by Midwives in accordance with the regulations of the Central Midwives' Board upon 129 occasions or in 27.7 per cent. of the 465 cases attended by them as follows:—

#### Condition of Infant--

Discharge from Eyes	••	•••	• • •	• • •	14
Prematurity, debility or	conge	enital	defects		10
Unsatisfactory condition	of i	nfant	• • •		10 — 34

#### Maternal conditions

#### During Pregnancy—

Albuminuria	• • •	•••	• • •	• • •	•••	2
Hæmorrhage		• • •	• • •	•••	• • •	4
Miscarriage	•••	• • •	• • •	•••	•••	3
General condition	uns	atisfac	torv			3 —12

#### During Labour-

	Perineal teat		• • •		• • •		41	
	Difficult or obstr	ucted	labour		• • •	• • •	22	
	Retained placents	·l	•••	- • •	• • •		2	
	Hæmorrhage			• • •	• • •		3	
	Fit			• • •	• • •		1	
	Presentation of C	Cord	• • •	•••	• • •	•••	3 - 7	72
Dur	ing Puerperium	-						
	Pyrexia			• • •			10	
	Tender legs						1 1	11

In addition the following notices were received from Midwives, pursuant to the regulations of the Central Midwives' Board:—

Notice of liability to be a source of infecti	ion	• • •	•••	10
Notice of still birth	•••	•••	•••	11
Notice of having laid out a dead body	• • •	• • •		1
Notice of artificial feeding	• •	• • •	• • •	6
	Total	• • •	• • •	28

In 108 instances, in which medical aid was sought by midwives the fees of the doctors were, in accordance with the Midwives Act, 1918, paid by the Corporation. The total sum paid to doctors by the Corporation in respect of medical aid to midwives during the year amounted to £123 11s. Od. compared with £88 8s. Od., £92 9s. 6d. and £71 9s. Od. in each of the three preceding years, of which £1 5s. Od. was for first visits to infants with Ophthalmia. and was consequently not required to be refunded by the parents pursuant to the resolution of the Maternity and Child Welfare Committee of September, 1926.

The relatives were asked to refund £122 6s. 0d. but on representations by them that they were unable to pay, the Committee after consideration of reports by the Civic Guild remitted accounts in 45 cases either partially or entirely, the total remissions amounting to £48 18s. 0d. Of the balance £73 8s. 0d. due to be refunded, £52 18s. 0d. had been repaid by the end of the year.

Of the balance outstanding from previous years, £3 5s. 6d. was paid, £5 1s. 0d. was remitted by the Committee after consideration of reports from the Civic Guild of Help as to the financial circumstances of the patients, while £3 4s 6d. remained outstanding at the end of the year.

#### SECTION III. LABORATORY FACILITIES.

The facilities for bacteriological and chemical examination of specimens were set out in the report for 1930. During the year arrangements were made for the examination of pathological specimens from the Municipal Hospital and samples of Graded and other milks at 'the Pathological Department of the local Southend General Hospital, thereby obviating the necessity of such specimens being sent to London Laboratories. Pathological specimens from patients in attendance at the Venereal Disease Treatment Cen'tre continue to be sent for examination by Professor Hewlett at the Seamen's Hospital.

The number of specimens examined at the Laboratory at the Borough Sanatorium during 1933 was as follows:—

		Positive.	Negative	Total
(a)	For presence of Diphtheria Bacilli:	-		
	From patients in the Borough			
	Sanatorium	141	767	908
	Sent by Medical Practitioners	100	1351	1451
(b)	For presence of Tubercle Bacilli			
,	in sputum	269	663	932
(c)	For Widal Reaction:—			
	Typhoid Fever	4	<b>9</b> 0	20
	Typhoid Fever Para-Typhoid B	}	<b>2</b> 8	32
(d)	For examination for Ringworm			
` ′	spores	5	18	23
(e)	For presence of Tubercle Bacilli			
	in Urine, pleural exudate, etc.	maga tun	6	6

SECTION IV. ADOPTIVE ACTS, BYELAWS, &c., IN FORCE.

These were set out in the Report for 1930. No new provisions came into force during the year.

#### SECTION V.

#### HOSPITALS.

Southend General Hospital.—This Voluntary Hospital which replaced the Southend Victoria Hospital and was opened on 13th November, 1932, is provided with up-to-date equipment, and having a specialist staff in all departments provides the Borough and surrounding area with all the facilities of a modern and efficient hospital. The provision of a Pathological Department, at which are carried out pathological investigations essential for modern methods of diagnosis and treatment, will serve to raise the standard of medical and surgical treatment, not only of hospital patients but also of patients under private medical care.

During the period from 13th November, 1932, up to 31st December, 1933, 384 patients were admitted to the private wards and 3,212 to the general wards, the average number of patients under treatment during the last six months of 1933 being 206 as compared with 221, the average number of available beds; the total number of operations performed was 2,410. Of the in-patients 2,655 were received from the County Borough. The number of patients in the Out-patient department was 11,143, the total number of attendances being 31,003, whilst 5,792 patients made 10,064 attendances in the Casualty Department. The District Nurses made 10,765 attendances at the houses of 206 patients. Ninety-five patients received "deep" X-Ray treatment on 771 occasions, whilst 206 received superficial X-Ray treatment on 525 occasions.

Municipal Hospital.—The report of the Medical Superintendent is printed at the end of the report. During the year the Health Committee has had under consideration a scheme for

necessary extensions including the provision of a new Nurses Home, separate hospital kitchen and stores, new Blocks for Maternity patients, for Children, and for Tuberculosis, and additional General Ward Blocks. Conferences have taken place with representatives of the Southend General Hospital, who have notified the Council that while they have no objection to the proposals of the Committee, it is the intention of the Board of Management, as soon as funds permit, themselves to proceed with the erection of additional buildings.

The work of the Municipal Hospital is carried on at present under very great difficulties. The lack of housing accommodation for the nursing staff necessitates the use of two temporary Nurses Homes some distance from the Hospital, notwithstanding the use of which, 36 of the nursing staff have to be accommodated in lodgings in the vicinity. There are no suitable lecture or tutorial rooms in the Hospital, with the result that 'the training of the Probationer Nurses suffers. The lack of patients' accommodation leads at times of pressure to serious overcrowding of some of the wards and inability to classify the patients, with the result that new admissions have to be allocated to Wards without regard to their age or nature of their ailment. The fact that the Maternity Ward has six beds only necessitates ante-natal and post-natal patients being accommodated in parts of general wards, which results in difficulties in nursing, and is a constant source of anxiety to the medical staff. One of the Ward Blocks is unsuitable for the treatment of the sick and its construction is such that it is difficult for the patients to be kept under proper supervision by the nursing staff, notwithstanding that the number of the latter is disproportionately large. The X-Ray apparatus is obsolete with the result that it is difficult to obtain satisfactory plates or to interpret them. The fact that the food of the patients is prepared in the kitchen of the Poor Law Institution causes difficulties in the provision of dietaries suitable for sick patients, and leads to numerous complaints. The lack of store rooms causes difficulties in economical administration, while the provision available for storing patients' clothing is of the most primitive character.

The need for immediate steps to be taken to bring the Hospital Buildings up to modern requirements is very urgent.

Borough Sanatorium.—During the year, the new Ward Block erected in 1930 was brought into use for the treatment of patients, the total accommodation now available being 108 for ordinary infectious diseases in four blocks of 22 beds each and two blocks of 10 each, 16 for advanced cases of Pulmonary Tuberculosis, and four single rooms for patients suffering from Venereal Diseases.

The following table shows the number of admissions, discharges and deaths at the Borough Sanatorium during the year 1933:—

sletoT	61	386	447	23	336	88
sisoluərədu <b>T</b>	71	21	33	15	∞	0
Other Diseases	:	1	-	÷	1	:
Whooping Cough.	:	garant	-	:		:
Admitted with Mother.		2	8	:	3	:
Smallpox	-	•	****	*	-	:
Typhoid Fever	_	4	5	i	_	4
Diphtheria Carriers	:	3	<i>(C)</i>	:	~	:
Sirəhthqi(I	4	77	16	9	99	61
Scarlet Fever	32	27.7	309	2	252	55
	Remaining on 1st Jan. 1933	Admitted during year	Under treatment during year	Died during year	Discharged during year	Remaining on 31st Dec. 1933

Mental Hospital Accommodation.—The Joint Visiting Committee, appointed to erect at Runwell a Mental Hospital to serve the needs of the County Boroughs of Southend-on-Sea and East Ham, hopes to be in a position to consider tenders for the erection of the Institution early in the coming year.

The number of patients maintained in Certified Mental Hospitals at the expense of the Council at the end of the year was 278 (89 males, 189 females), of whom 194 (55 males, 139 females) were at Severalls Mental Hospital, Colchester, 7 (1 male, 6 females) at Brentwood Mental Hospital, 15 (5 males, 10 females) at the Exeter County Hospital, 36 (11 males, 25 females) at Netherne Mental Hospital (Surrey), and 14 (all males) at the Devon County Hospital at Exminster. The remaining patients were at nine Mental Hospitals belonging to the London County Council and other Local Authorities.

At the end of the year, 71 mental patients chargeable to the Borough were being maintained in the Mental Block of the Municipal Hospital and of these approximately one-half are awaiting transfer to Certified Mental Hospitals.

#### SECTION VI. MATERNITY AND NURSING HOMES.

One Home previously registered for the reception of Maternity patients only was during the year re-registered as a Nursing and Maternity Home. One application for registration of a Nursing Home was refused on the grounds of unsuitability of premises. At the end of the year there were on the Register two Maternity Homes, four Nursing Homes other than Maternity Homes, and 10 Nursing and Maternity Homes. The Woman Assistant Medical Officer made 21 routine inspections and two special inspections of the Homes during the year.

#### SECTION VII. CLINICS & TREATMENT CENTRES.

1. Infant Centres. — The particulars of attendances, etc., are shown below:—

		Sou+h-	S	hoebui	y-
	Southend.	church.	Leigh,	ness.	Total
No. of sessions held	97	95	56	6	254
No. of individuals who attende	d:—				
Infants	434	428	225	36	1123
Children aged 1 to 5	233	241	134	30	638
Expectant Mothers	445		82	—	527
Nursing Mothers	420	359	174	27	980
Others Mothers	245	302	198	26	771
Totals	1777	1330	813	119	4039
Total attendances of:—					
Infants	4838	4313	2208	97	11456
Children aged 1 to 5	1352	2505	1214	83	5154
Nursing Mothers	4834	4197	2298	103	11332
Other Mothers	1172	1772	971	42	3957
No. of children aged 1 to 5 s	ub-				
jected to routine med					
inspections	365	431	46	60	902

2. Ante-natal Clinics.—The particulars of attendances at the Southend and Leigh Clinics respectively are as follows:—:

	So	uthend.	Leigh	Totals.
No. of sessions held	• • •	50	12	62
No. of individual expectant mothers	•••	445	82	527
No. of attendances of expectant mothers	• • •	1123	144	1267

3. Venerea! Diseases Treatment Centre.—The work carried out at the Treatment Centre at the Borough Sanatorium during the year was as shown below:—

1.4C/WWW.CCB	activation to the control page of the second control properties and control to the second control to the second	Syp	hilis		oft ncre		iorr- œa	tions	ndi- other ian ereal		Total	s
		M'ls	F'ls	M'ls	F'ls	M'ls	F'ls	M'ls	F'ls	M'ls	F'ls	Totals
	Number of cases on 1st lan- uary under treatment or observation Number of cases removed from the register during	28	30	2		31	17	1	1	62	48	110
3∙	any previous year which returned during the year under report for treatment or observation of the same infection	•••	3								3	3
	clusive of cases under Item 4) suffering from Syphilis, primary ,, secondary	10 6						• • •		10 6	6	10 12
	,, latent in 1st year of infection ,, all later stages ,, congenital Soft Chancre	1 8 5	3 11 2			•••	•••		•••	1 8 5	3 11 2	4 19 7
	Gonorrhæa, 1st year of infection ,, later Conditions other than	• • •		7	•••	86 	15		•••	86	15	7 101 3
	venereal		• • •	• • •	•••			127	36	127	36	163
4.	Number of cases dealt with for the first time during the year under report known to have received treatment at other Centres for the same infection	Q,	3			12	2		1	20	6	26
5.	Totals of Items 1, 2, 3 & 4 Number of cases discharged after completion of treat- ment and final tests of cure	<b>6</b> 6	<b>5</b> 8	3		129	37 11	128 126	38	332 177	133	465
6.	Number of cases which ceased to attend before completion of treatment and were, on first attendance suffering from		•									
,	Syphilis, primary, secondary, latent in 1st year	2 2	1	• • •	•••	•••	•••			2 2	1	3
	of infection, all later stages, , congenital Soft Chancre Gonorrhæa, 1st year of	3 · 2	3 1		• • •	•••	•••	•••	•••	3 2 3	3 1	6 3 3
7.	infection ,, later  Number of cases which	• • •	•••	•••	• • •	22	2 1	•••		<b>2</b> 2	2	24
8.	ceased to attend after com- pletion of treatment but be- fore final tests of cure Number of cases trans-	3	8	2		20	3	•••	•••	25	11	3
	ferred to other Centres or to Institutions, or to care of private practitioners Number of cases remaining	5	5	1	•••	13	3	•••		19	8	27
	under treatment or observa- tion on 31st December Total of Items 5, 6, 7, 8 & 9	43 66	39 58	9	•••	32 129	17 37	2 128	 38	77 332	56 133	133 465

Best for the street from the street of the filter of the filter of the street of the s			The property and			O Marine Carrena constitue		ndi-			
	Syp	hilis		oft ncre		orr- œa	th	other an ereal.		Totals	
	M'ls	F'ls	M'ls	F'ls	M'ls	F'ls	M'ls	F'ls	M'ls	F'ls	Totals
10. Number of cases in the following stages of syphilis included in item 6 which failed to complete one course of treatment:—											
Syphilis, primary ,, secondary ,, latent in 1st year	1 1					•••		•••	1 1	•••	1 1
of infection ,, all later stages ,, congenital	1	1		• • •		• • •	•••	• • •		1	2
(a) for individual attention of medical officers (b) for intermediate treat-	1071	845	23		1170	625	312	94	2576	1564	<b>4</b> 140
ment, e.g., irrigation, dressing  Total attendances  12 In-patients:—		845	1 24		2422 3592	356 981	252 564	11 105	26 <b>75</b> 5251	367 1931	3042 7182
(a) Total number of persons admitted for treatment during the year					• • •					•••	• • •
(b) Aggregate number of "in-patient days" of treatment given	1				•••		•••			•••	•••
	Un 1 Y		1 and under 5 a 5 years		under	15 ye and			Totals		
-	M'ls	F'ls	N'ls	F'ls	M'ls	F'ls	M'ls	F'ls	M'	ls	F'ls
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods		•••			1		4	2	5		2
			nobenz ompoun			M	ercury		Bi	smuth	
	N	<b>A</b> ,B.	1 5	Sulphos	stab.				Bis	mostab	
<ul> <li>(a) Total number of injections given (out-patients and in-patients)</li> <li>(b) Number of injections included in (a) given to patients who on first</li> </ul>		362		20						830	
attendance at this Centre were suffering from primary and secondary syphilis		231								326	. Anna anna anna anna anna anna anna ann

		For detection	of	Serum	Tests.
	Spirochete	s Gonococci	Other Organisms	Wassermann Re-action	For Gonorhœa
<ul> <li>(a) Specimens examined at and by Medical Officer of the Centre.</li> <li>b) Specimens from persons attending at Centre, examined at Bacteriological Laboratory at the Seamen's Hospital, Greenwich.</li> </ul>	14	630		249	
Hospital, Greenwich.	<b>'</b>	•••	••	247	20
County or County B in which patient resides		Southend- on-Sea.	Essex	London	Total
ddur- con- suf- suf-	.s	45	18		63
		4	3		7
of persons a dealt with year at or in with the Clinic for th found to b rom:  Com: Com: Com: Com: Com: Com: Com:	hoea	76	37	5	118
A. No. each are each are ing the nection patient time and fering all the conditions are remarkable.	than	116	45	3	164
Тоtal		241	103	8	352
B—Total number tendances at the patient Clinic of patients residing if area C—Aggregate of "In-patient days" patients residing in	Out- of all n each number ' of all	5507	1633	42	7182
area D—Number of de Arsenobenzol Com	oses of		•••		•••
given <b>in the:</b> 1 Out-patient Clin 2. In - patient I ment to patients re	Depart-	299	83		382
in each area		• • •	•••		• • •

The following table shows how the work at the Treatment Centre compares with that in previous years.

New	Patients suffering	1925	1926	1927	1928	1929	1930	1931	1932	1933
From	Syphilis	31	44	57	32	32	47	37	31	63
,,	Gonorrhœa	110	112	113	116	160	177	117	140	118
	Soft Chancre	•••	6	2	5	3	5	6	4	7
	Total Attendances	6103	6782	6213	5539	6111	7867	7736	6725	7182

# SECTION VIII. UNMARRIED MOTHERS AND THEIR INFANTS.

During the year six unmarried mothers with their infants were admitted to St. Monica's Girls' Shelter after discharge from the Maternity Wards of the Municipal Hospital. Four of the mothers were discharged from St. Monica's after stays of 29, 29, 19 and 19 weeks respectively, while the remaining two were at the end of the year still in residence after stays of 17 and 2 weeks respectively. The total contributions towards the cost of maintenance made by the Maternity and Child Welfare Committee to the Home during the year amounted to £176 17s 0d. as compared with £79 10s. 0d. in the previous year.

#### SECTION IX. MATERNAL MORTALITY.

Five mothers died in the Borough from diseases of pregnancy or as a result of parturition. Of these, four took place at the Southend General Hospital and one at a Maternity Home. Two of the deceased were non-residents and died from Puerperal Septicaemia following Craniotomy and from Placenta Praevia respectively. The three residents died from Ruptured ectopic gestation, Peritonitis following Caesarean Section for Placenta Praevia, and Syncope due to retained placenta, respectively.

Four mothers ordinarily resident in the Borough died at the Municipal Hospital. Of these one died from Post-partem Hæmorrhage shortly after admission to hospital, to which she was sent owing to retention of Placenta after confinement at her home in the Borough. The remaining patients were confined at the Hospital; one died from cerebral embolism and the other two from Puerperal Septicaemia.

### PART IV.

### SECTION I. MENTAL DEFICIENCY ACT.

The total number of defectives on the Register on December 31st was 277 (137 males, 140 females) as compared with 251 (124 males, 127 females) at the beginning of the year. Of these,

66 (34 males, 32 females) were in certified institutions, 16 (4 males, 12 females) were in other institutions, 6 (3 males, 3 females) were on licence from institutions, 3 (1 male, 2 females) were under guardianship, and 134 (69 males, 65 females) were under statutory supervision and 52 (26 males, 26 females) were under voluntary supervision.

Institutional Care.—During the year, the Mental Deficiency Committee provided institutional care at the Royal Eastern Counties Institution for four male defectives and one female defective, and at the Besford Court Certified Institution for one defective. They also assumed responsibility, on the extension of the Borough on October 1st, for the maintenance of one female defective who was being maintained at the Royal Eastern Counties Institution at the expense of the Essex Public Assistance Committee. Of the defectives detained at the Royal Eastern Counties Institution, one male died during the year, and two (one male and one female) were released on licence.

At the end of the year, defectives were being maintained in institutions as under:—

(a) By the Mental Deficiency Committee.

Roya	al Eastern	Counties	Institution	. •	• •	25	23
Besf	ord Court	Certified	Institution		• • •	2	
Roya	al Earlswo	od Institu	ction	•••	•••	4.	2

St. Teresa's (Lewisham) Certified Institution 2 2 Dovecot (Liverpool) Certified Institution 1 1 Dr. Barnardo's (Barkingside) Certified Institution 1 1 • • • • • • Southend Municipal Hospital 6 9 3

Males. Females. Total.

48

2

6

Rochford Poor Law Institution ... 1 6 7

(b) By the State.

Rampton State Institution ... ... 2 1 3

(c) By Relatives.

At Royal Eastern Counties Institution ... 1 2 3

In addition six defectives were absent from Certified Institutions on licence, viz.:— three males and two females from the Royal Eastern Counties Institution, and one female from Dr. Barnardo's Certified Institution.

At the end of the year, in addition to 16 defectives (4 males, 12 females) maintained in the Municipal Hospital and the Rochford Poor Law Institution, there were eight defectives (3 males, 5 females) awaiting admission to certified instutions.

Guardianship.—Three defectives were, at the end of the year, under guardianship, viz.:— one male and two females, all of whom had previously been in Certified Institutions.

Supervision.—During the year 875 visits of supervision were paid by the Health Visitors and other officers of the Health Department to the 156 defectives under supervision.

#### SECTION II. BLIND PERSONS ACT, 1920.

Register of the Blind.—The following table shows the number of blind persons on the Register at the beginning and end of the year:—

	Males.	Females	. Total.
Number on Register on 1st January, 1933	64	117	181
Admitted to Register during year	13	18	31
Died during the year	4	9	13
Left Borough during the year	1	3	4
Number on Register on 31st December, 1933	72	123	195

Two of the males are resident in Shoeburyness and were transterred from the County Council register on October 1st on the extension of the County Borough.

Of the 195 on the Register, 148 were on Register A, 143 (67 men and 76 women) living in their own homes in the County Borough and five (women) living in Institutions in the County Borough. Fourteen (5 men and 9 women) were on Register B, i.e.:— though ordinarily resident in the County Borough, were temporarily in Hospitals and Convalescent Homes outside the Borough.

The remaining 33, all women, were on Register C, being temporarily resident in Institutions in the County Borough, although ordinarily resident in other areas.

Home Visitor.—The number of visits paid during the year by the Certificated Home Visitor was 1,738. The number of lessons given by her was 57, 55 being lessons in embossed type and the remainder lessons in simple pastime handicraft. Fifty-seven attendances were made at social gatherings with the blind persons.

Training.— There were no blind persons who required training during the year.

Home Workers.—The number of approved Home Workers at the end of the year was ten. Three are engaged in hand-knitting, two in chair-caning, and one each in machine-knitting, basket-making, boot-repairing and piano-tuning, while one divided her time between machine-knitting and hand-knitting. The work is supervised by the London Society for Training the Blind in accordance with the Scheme adopted in 1922. Augmentation of wages was paid at the rate of ten shillings weekly to all the Home Workers.

Institutional Care.—One aged blind woman is being maintained in the North London Homes at a cost to the Town Council of 25/- per week, less the sum received by her by way of Old Age Pension. The Committee are responsible for the maintenance of three former Board of Guardian cases, at the Blind Homes at Maldon and Swansea, and the Rochford Poor Law Institution respectively.

Tram Passes.—The number of tram passes issued to the blind by the Transport Committee on the recommendation of the Statutory Committee under the Blind Persons Act was 20.

Periodicals. — Magazines and newspapers in embossed type have been issued to 21 blind persons throughout the year at the expense of the Statutory Committee.

Library.—At the end of the year there were 22 blind readers of books obtained from the National Library for the Blind. Of these 14 received books direct and eight received books through the Corporation's Public Library.

Wireless. — The number of Certificates of Blindness issued during the year under the Wireless Telegraphy (Blind Persons Facilities) Act, 1926, was 12. One Wireless Set for the use of blind persons has been received from the British "Wireless for

the Blind "Fund, making a total of 31 sets received for the use of the local blind. The sets of necessitous blind persons have been kept in repair by the local Radio Society.

Blind Persons Fund.—The following statement of Receipts and Payments for the year ended 31st December, 1933, has been certified to be correct by the Borough Treasurer as Honorary Auditor:—

#### Year ended 31st December, 1933.

#### RECEIPTS.

Maintenance Section:—						
Balance in hand on January 1st	574	6	0			
Grant from Town Council	1200					
Grant from Town Council				1774	6	0
General Section:—				1111	U	O
Balance in hand on January 1st	16	16	0			
Grant from South Eastern & London Counties	10	10	U			
	97	7	3			
		0				
		0				
Grant for Mr. C. from Gardener's Trust  Donation from Westcliff Silver Mission Band		11				
from Southend & District Schools'	17	1.1	U			
**	19	17	10			
Football Association		0	0			
,, from Rotary Charities Committee		0				
,, from Captain Agnew and G. Rose, Esq.		11				
,, from S. P. Brinson, Esq		10	0			
By repayment of loans to Blind Persons	Ð.	10	U	100	15	0
	-			109	19	U
			/	1,884	1	0
			た	, 1,004	л.	U
PAYMENTS.						
PAYMENTS.  Maintenance Section:—						
Maintenance Section:—  By weekly allowances to necessitous unemployable blind persons	1213	8	8			t <sub>er</sub> garner
Maintenance Section:—  By weekly allowances to necessitous unemployable	1213	8	8			to demonstrate the second seco
By weekly allowances to necessitous unemployable blind persons	1213 52	0				
Maintenance Section:—  By weekly allowances to necessitous unemployable blind persons ,, grant for board and lodging of C.D., a neces-	52	$0 \\ 2$	0			
By weekly allowances to necessitous unemployable blind persons		$0 \\ 2$	0			
By weekly allowances to necessitous unemployable blind persons ,, grant for board and lodging of C.D., a necessitous but not unemployable blind person ,, By insurance of Home Visitor	52	$0 \\ 2$	0	1774	6	0
By weekly allowances to necessitous unemployable blind persons ,, grant for board and lodging of C.D., a necessitous but not unemployable blind person ,, By insurance of Home Visitor	52	$0 \\ 2$	0	1774	6	0
By weekly allowances to necessitous unemployable blind persons	52 508 16	0 2 15	0 1 3	1774	6	0
By weekly allowances to necessitous unemployable blind persons	52 508 16 13	0 2 15 0 0	0 1 3 	1774	6	0
By weekly allowances to necessitous unemployable blind persons	52 508 16 13 3	0 2 15 0 0 14	0 1 3  0 0 0	1774	6	0
By weekly allowances to necessitous unemployable blind persons	52 508 16 13 3	0 2 15 0 0	0 1 3  0 0 0	1774	6	()
By weekly allowances to necessitous unemployable blind persons	52 508 16 13 3 27	0 2 15 0 0 14 14	0 1 3  0 0 0	1774	6	0
By weekly allowances to necessitous unemployable blind persons	52 508 16 13 3 27 5	0 2 15 0 0 14 14	0 1 3  0 0 0 0	1774	6	0
By weekly allowances to necessitous unemployable blind persons	52 508 16 13 3 27	0 2 15 0 0 14 14 0 16	0 1 3 0 0 0 0 0	1774	6	()
By weekly allowances to necessitous unemployable blind persons	52 508 16 13 3 27	0 2 15 0 0 14 14	0 1 3 0 0 0 0 0	1774	6	0

,, affiliation fee to South Eastern	& London	n					
Counties' Association		•	10	6			
,, Cheque Books	•••		1 0	()			
,, expenses of Social Entertainments	· · · · · · · · · · · · · · · · · · ·	•	12	6			
,, postage on books from the Nationa	al Institut	e					
for the Blind		•		8			
		***************************************			74	2	8
,, cash at Bank		. 33	3 13	10			
,, cash in hands of Treasurer	• • • • • • •	•	18	6			
					35	12	4
	Total	• • •	• • •	£	1,884	1	0

Domiciliary Assistance.—At the suggestion of the Ministry of Health, the Town Council has adopted Regulations governing the provision of domiciliary assistance to unemployable and other necessitous blind persons. These Regulations come into force on 1st January, 1934, and are as follows:—

Domiciliary Assistance to Unemployable Blind Persons.

- 1. (a) The income of unemployable Blind Persons may be augmented, where necessary, by such amount as will be required, after taking into account the existing means of the blind person, and such contributions as may equitably be expected to be made by persons legally liable to maintain such blind persons, to ensure that each will have an income of twenty-five shillings per week or such other sum as the Council may from time to time determine.
- (b) In the case of a man and wife both of whom are blind and unemployable and reside in the same house, the amount of financial assistance which may be given under these Regulations shall be such amount as may be necessary to ensure that they will have a joint income of forty shillings per week or such other sum as the Council may from time to time determine.
- (c) A blind woman with an able-bodied husband not certified as "blind" and a blind woman living apart from her husband shall be eligible to receive such financial assistance under these Regulations as may be determined on the merits of each individual case, but unless the circumstances are exceptional no assistance will be given to blind women with able-bodied husbands in employment.
- (d) Persons eligible for assistance under paragraphs 1 (a), 1(b) and 1 (c), above, must (1) be of British Nationality, (2) have acquired a settlement under the Poor Law Act in the County Borough, (3) have been so resident for a period of not less than one year immediately preceding the date of application for domiciliary assistance, and (4) have attained the age of eighteen years. Provided, however, (a) that blind persons coming to reside in the Borough who have been in receipt of financial assistance elsewhere under a scheme of a Local Authority for the welfare of

the blind up to the time they changed their residence, shall be eligible for financial assistance under this scheme; if such assistance is less than the amount payable under this Scheme then the amount payable will not exceed the amount they were previously receiving until they fulfil the residential qualification referred to above. In special cases, however, where hardship would otherwise occur, unemployable blind persons may be granted assistance if resident in the Borough, even though they may not have completed the stipulated period of residence; (b) that the Council may consider applications from persons who do not fulfil all or any of the above requirements and grant such financial assistance as may be determined on the merits of each individual case.

#### Domiciliary Assistance to other Blind Persons.

- 2. The amount of domiciliary assistance to be given where necessary to blind persons under the age of eighteen years shall be determined on the merits of each individual case, but regard shall be had to the necessity of encouraging the recipients to undergo training if capable of being trained.
- 3. The amount of domiciliary assistance to be given to unemployed, partly employed, or wholly employed blind persons, who are unable completely to maintain themselves, or to other necessitious blind persons not coming within the definition of an "unemployable blind person," shall be determined on the merits of each individual case, but, in considering the circumstances of each case, regard shall be had to the necessity of encouraging the recipients to follow some regular employment.
- (a) Persons eligible for assistance under paragraphs Nos. 2 and 3 above, must (1) be of British Nationality, (2) have acquired a settlement under the Poor Law Act in the County Borough, and (3) have been so resident for a period of not less than one year immediately preceding the date of application for domiciliary assistance. Provided, however, that the Council may consider applications from persons who do not fulfil all or any of the above requirements and grant such financial assistance as may be determined on the merits of each individual case.
- 4. The scale of financial assistance laid down in Clause 1 of these Regulations shall not be applicable to a blind person who:--
  - (a) refuses medical or surgical treatment likely to benefit his condition of vision:
  - (b) refuses to give information as to his or her means;

but such cases shall be dealt with by the Council on the merits of each case.

#### Definitions.

5. (a) For the purpose of these Regulations, the definition of the term "blind person" is that contained in Section 1 of the Blind Persons Act, 1920, viz.:— the person must be "so blind as to be unable to perform any work for which eyesight is essential."

Applications for domiciliary assistance under these Regulations must be accompanied by evidence of age. Before a grant is made medical evidence shall be obtained from a medical practitioner with special experience in ophthalmology showing (i) the degree of visual acuity in each eye of the applicant, after correction of errors of refraction, (ii) the nature and extent of the visual defects present, and (iii) a definite opinion, formed after due consideration of all visual conditions, that the person is so blind as to be unable to perform any work for which eyesight is essential.

(b) For the purpose of these Regulations an "unemployable blind person" is a person of the age of eighteen years and upwards who, in the opinion of the Council, is not employed and is incapable of employment in an economic sense, or is not under training or capable of being trained.

#### Calculation of Existing Means.

- 6. The method to be followed in calculating the value of existing means in connection with these Regulations shall be that set out in the Schedule hereto.
- 7. Any person not divulging his or her full income, or submitting false information in respect thereto, and thereby obtaining a higher rate of assistance, shall be required to refund any excess over the correct amount that may have been paid.
- 8. Where any blind persons directly or indirectly deprive themselves of any income or any property in order to qualify for assistance under these Regulations, or assistance at a higher rate than that to which they would otherwise be entitled, such income or the yearly value of such property shall be assessed as part of their means.
- 9. In the case of a blind man living with his sighted wife in the same house his income shall be assessed at half the total income of the couple, after deducting therefrom the sum of ten shillings.

#### Periodical Review of Cases.

10. All cases assisted under these Regulations shall be subjected to a detailed review at regular intervals of three months.

#### Administration of the Regulations.

- 11. The Council's Statutory Committee under the Blind Persons Act shall be responsible, on behalf of and subject to the general direction and control of the Council, for the administration of these Regulations for the provision of domiciliary assistance to necessitous blind persons ordinarily resident in the County Borough subject to the following conditions:—
  - (i) The Council shall be consulted on all matters of principle relating to the administration of these Regulations, and shall receive from the Statutory Committee reports on the work conducted thereunder.

- (ii) The accounts relating to domiciliary assistance shall be kept in a form approved by the Council.
- (iii) (a) Applications for assistance should be addressed to the Medical Officer of Health, Health Offices, Southend-on Sea. The applications will be investigated by the Home Visitor of the Blind or other member of the staff of the Medical Officer of Health.
  - (b) The grants will be assessed by the Voluntary Care Sub-Committee of the Statutory Committee and ten representatives of the Council shall be members of the Voluntary Care Sub-Committee.
- (iv) Grants shall be paid by the Home Visitor of the Council or in such other manner as may from time to time be prescribed by the Council.
- (v) Some form of receipt or witnessed statement for payments made under these Regulations shall be obtained from the recipients of the grants.

12 The Regulations shall come into force on the first day of January, 1934.

SCHEDULE.

Method of assessment of existing means.

	Method of assessment of existing means.									
No.	Particulars.	Method of assessment.								
1.	Wages, bonus, overtime or other earnings.	At rate stated by employer.								
2.	Pay, pension, or other allowance from any Friendly or other Society or trade union, or from any person, firm or company, or of any Naval, Army, Civil Police, or other pension, including any bonus or statutory additions.	At rate stated by donor.								
3.	Charitable grant.	At rate stated by donor.								
4.	Investments.	Market Value treated as Capital (See (7)).								
5.	Money in hand or at the Bank.	Treated as Capital.								
6.	Property owned and occupied.	Net annual value under Schedule A. treated as capital.								
7.	Land and/or property not personally used.	Capital value treated as Capital.  The annual income from Capital (See 4, 5, 6 & 7) shall be regarded as 5 per cent. on first £400 (after deducting £25) and as 10 per cent. on balance.								

No.	Particulars.	Method of Assessment.
8.	Net profit arising out of the letting of furnished rooms or from taking in lodgers.	Actual figures less expenses being net annual value of portion of house let, plus corresponding proportion of rates including charges for gas and electricity.
9.	Income derived from any business, or any other occupation whatso-ever.	Actual income less expenses.
10.	Contributions by relatives or other persons, including free lodging and/or board.	Contributions as given. Free lodging to be assessed at 7/6d. for single person, 10/- for married couple. Free board assessed at 16/- per week for single person or 27/6d. per week for married couple.
11.	Unemployment Insurance Benefit.	As given.
12.	National Health Disablement Benefit.	As given.
13.	Sick allowance under medical certificate.	As given, first thirteen weeks being disregarded.
14.	Separation allowance, if any.	As stated.
15.	Any other income whatsoever.	As stated.

During the year 1933, maintenance weekly allowances were made to 39 necessitous unemployable blind persons at a total cost of £1,213 8s. 8d. and £52 was paid for the board and lodging of a blind person to supplement his wages during a trial period of employment in the boot-repairing workshop at the Rochford Institution. The weekly allowances were fixed in accordance with the regulations above referred to, two blind persons receiving weekly allowances of 25/-, three of sums between 20/- and 25/-, eight of sums between 15/- and 20/-, 13 of sums between 10/- and 15/-, five of sums between 7/6d. and 10/-, five of sums between 5/- and 3/-0.

Scheme under Blind Persons Act.—The Town Council has, at the request of the Ministry of Health, amended their scheme pursuant to Scale 2 of the Act. The new scheme which comes into operation on 1st January, 1934, is as follows:—

Scheme under Section 2 of the Blind Persons Act, 1920.

This Scheme applies to the area of the County Borough of Southend-on-Sea and shall come into operation on the 1st day of January, 1934.

A Committee to be known as the Statutory Committee under the Blind Persons Act and referred to hereafter in this Scheme as "the Committee" shall exercise, subject to the approval of the Council, the powers of the Council under the Act other than the power of raising a rate or of borrowing money. The Committee shall comprise the Council Members of the Health Committee and one member of the Education Committee elected by the Education Committee and shall have power to co-opt two persons not members of the Council but specially interested in the welfare of the Blind.

The Committee shall take all necessary steps:-

#### (1) Registration.

To provide for the registration and classification of all blind persons for the time being ordinarily resident in the County Borough. No person's name shall be added to the register of blind persons until he has been examined and certified by a medical practitioner with special experience in ophthalmology, to be blind within the meaning of the Blind Persons Act, 1920.

#### (2) Children under School Age.

To provide for the welfare of blind children under school age through the Home Teachers, acting in co-operation with the Health Visitors. Where the home conditions are unsatisfactory, to make provision, when considered desirable, for accommodation in one of the Sunshine Homes of the National Institute for the Blind, or similar institution; or, when the child is between two and five years of age to refer the case to the Education Committee in order that this latter Committee may make provision, if they consider it desirable, in a special school, under Part V of the Education Act, 1921, recognised by the Board of Education as suitable for the reception of blind children of this age.

#### (3) Education and Training.

To carry out through the Education Committee the duties of the Council, as a Local Education Authority, in respect of the following classes of blind persons, viz.:—

#### (a) Children from 5 to 16 years of age:-

To provide for the elementary education of blind children in schools certified by the Board of Education under Part V. of the Education Act, 1921.

(b) Young persons over 16 years of age and suitable adults:—

To make such provision as the Education Committee deem expedient for such persons as are likely to profit thereby

- (i) for technical training in suitable trades or handicrafts at institutions recognised by the Board; and
- (ii) for secondary education or professional training of blind persons who have special aptitude therefor, in institutions recognised by the Board for this purpose.
- (c) To provide in necessitous cases proper maintenance of the children or persons referred to in the preceding paragraphs during the period of education or training by the payment of approved fees at recognised schools or institutions or in any other manner which may be contemplated by the regulations of the Board and determined by the Local Education Authority.

#### (4) Workshop Employment.

To provide, or arrange for the provision of, employment for suitable blind persons in workshops for the blind, or elsewhere; the general conditions of employment to be subject to the approval of the Council, and the employees in workshops for the blind to be paid at the Trade Union or other standard rate customary in the particular class of work on which the blind person is employed.

#### (5) Home Employment.

To provide for the employment of suitable blind persons in a Home-workers Scheme; the general conditions of employment to be subject to the approval of the Council.

#### (6) Augmentation.

To provide where necessary for the augmentation of the wages or earnings of workers employed in a workshop for the blind, under a Home-workers Scheme, or elsewhere, on such scale as may be approved by the Council.

#### (7) Home Teaching.

To provide for the home teaching and visiting of the blind by the appointment of such number of Home Teachers as may be necessary; the duties of the Home Teachers will be to visit the blind in their own homes, to teach them as far as possible to read Braille or Moon Type and to instruct them in simple pastime occupations, and generally to assist in promoting the social welfare of the blind. The appointment of Home Teachers shall be subject to the approval of the Council.

#### (8) Homes.

To provide, or arrange for the provision of, accommodation in Homes for the Blind for suitable adult persons who are incapable of work and are in need of such accommodation.

#### (9) Hostels.

To provide, or arrange for the provision of, accommodation in Hostels for the Blind for suitable employed blind persons who for lack of housing accommodation or other satisfactory reason require such provision.

## (10) Unemployable or other destitute Blind Persons.

- (a) In conjunction with the Public Assistance Committee to consider the cases of unemployable or other destitute blind persons who are in need of institutional or other non-domiciliary assistance and to render such assistance as may be desirable in each case, either by payment of recognised fees at approved homes for the blind, by boarding-out or otherwise.
- (b) To provide such domiciliary assistance as may be necessary to unemployable and other necessitous blind persons in accordance with Regulations made by the Council and approved by the Minister of Health.

#### (11) General Social Welfare.

To promote, or arrange for the promotion of, the general social welfare of the blind by the provision of embossed literature, social and handicraft centres, pastime occupations, concerts, lectures and other similar means.

- (12) To do all such other lawful things as may be necessary for carrying into effect within the County Borough of the above provisions.
- Note.—The provisions included in Article 2 on page 1 of this Scheme, dealing with children between the ages of 2 and 5 years, and Article 3, form part of the Council's Scheme of education under the Education Act, 1921, and are included here for information only.

Contributions to Voluntary Agencies.—In accordance with the new scheme drawn up by the Minister of Health pursuant to Section 102 (1) of the Local Government Act and applicable during the financial year 1933-34 and the three succeeding years, the Council paid during the year by quarterly instalments the following contributions to Voluntary Associations which render either National services or services to the local blind:—

South Eastern and London Counties Association		£23
National Library for the Blind		£23
London Society for Teaching and Training the Blind	•••	£330
North London Homes for the Blind	•••	£114
National Institute for the Blind		£24
Indigent Blind Visiting Society		£26

At the request of the Council, the contribution to the National Institute for the Blind was deducted by the Ministry of Health from the Block Grant pursuant to Section 106 of the Local Government Act.

The London County Council continues to undertake on behalf of the Town Council the supervision of the Voluntary Associations and submits reports at intervals.

# PART V.

## GENERAL SANITATION.

Water Supply.—The Southend Waterworks Company, which supplies the greater portion of the Borough, including the added area of Eastwood, continued throughout the year to give a constant supply from their Purification Works at Langford; the water has been at all times bright, free from objectionable taste and colour, and bacteriologically of the same high degree of purity as in past years. The hardness has varied from 10.5 to 13.5 degrees, of which from 3 to 4 degrees are temporary hardness. The area formerly comprising the Shoeburyness Urban District is supplied from the deep well of the Urban District Council.

About twenty houses in the Shoeburyness area and a considerable number in the Eastwood area are supplied from shallow wells, many of which in the latter area are not properly constructed so as to obviate surface pollution; these are being dealt with. A few houses in the outlying portion of Southchurch Ward are also served by shallow wells, and steps are being taken to have them connected wherever possible to the Company's main.

Sewerage and Sewage Disposal.—The works authorised by the Corporation Act, 1926, were completed during the year. The works comprise:—

- (a) The construction of a 60in. diameter effluent outfall from Prittlewell Sewage Disposal Works to the Estuary of the River Thames, via Eastern Avenue, Bournes Green, Thorpe Hall Avenue, and discharging into the river at a point approximately 1\frac{1}{3} miles south of the Thorpe Esplanade, and 1\frac{1}{2} miles east of the Pier. The total length of the outfall is approximately 4\frac{3}{4} miles.
- (b) The construction of two Detritus Pits and three sedimentation tanks equipped with clarifiers at the Prittlewell Sewage Disposal Works. The sedimentation tanks have a total capacity of 2,250,000 gallons, and are designed to treat up to three times dry weather flow—9,000,000 gallons.
- (c) Additional Pumping Plant for pumping sewage up to the sedimentation tanks has been installed, comprising three 8in. diameter Tangye Pumps, and sludge pumping plant has also been installed to pump sludge from the Prittlewell Sewage Disposal Works to the sludge disposal lands at Barling.
- (d) The construction of a 9in. diameter cast-iron pipe sludge pumping main from Prittlewell Sewage Disposal Works to the lands purchased at Barling for use as sludge disposal lands. These lands contain Roper's and Trumpion's Farms with an area of approximately 160 acres.
- (e) The construction of Chlorinating Tanks for use for treating the effluent from the sludge disposal area before discharging into the River Roach.

The sewers laid during the year include 920 yards and 1,820 yards of soil sewers and stormwater sewers laid under the Private Street Works Act, 6,455 yards and 279 yards of soil sewers and stormwater sewers by estate owners, and 1,279 yards and 1,890 yards of soil sewers and stormwater sewers and outfalls in various portions of the Borough, a total of 4.9 miles of soil sewers and 2.26 of stormwater sewers.

In the added area of Eastwood, although soil sewers had been laid in the principal roads, in very few instances had the drainage of houses been connected to the sewer, many continuing to drain into a brook with causation of serious nuisance. Considerable attention was directed to the abatement of this nuisance with the result that by the end of the year the drainage of 78 premises had been connected to the sewers, but in spite of this it was estimated that at the end of the year only about one-third

of the houses in the Eastwood added area were so connected. Many additional roads in this area require to be sewered, as the cesspools into which the houses drain result in serious nuisance.

Similarly, in the added area of Shoeburyness, no soil sewer is available in several of the roads, many of the houses draining into cesspools, while in some cases pail closets and even privy middens are in use; steps are being taken to eliminate the latter by the substitution of pail closets for use pending the provision of the necessary sewers. So far as can be estimated, about 110 houses are not connected to a sewer. The whole question of sewerage and of sewage disposal in this area is under consideration.

About 25 houses in the outlying portions of Southchurch and Thorpe Wards are also not drained to the Council's sewer, being served by cesspools and pail closets.

Refuse Collection.—The collection of refuse in the Shoeburyness added area is carried out by a contractor who disposes of it on a dump near a brickfield in the vicinity, but as soon as other arrangements can be made, the collection and disposal will be carried out by the Council's staff in the same manner as in the rest of the Borough.

In the added portion of Eastwood the collection of refuse, as also of night soil, is also carried out by a contractor, who dumps this refuse on a brickfield and disposes of the night soil in trenches on land forming part of a nursery.

In the remainder of the borough the collection is made by the Council's staff, the refuse being disposed of at the Refuse Destructor adjoining the Sewage Works at Prittlewell. The Cleansing Superintendent has kindly furnished the following figures:—

	1932	1933
House Refuse—Average weight in tons collected daily	98.1	98.3
Average number of bins emptied daily	5383	5333
Trade Refuse—Number of loads collected	2239	3735
Fish Offal— Weight in tons collected	231.1	303

Horse vehicles are gradually being eliminated and replaced by motor transport, only 2.8 horses being now utilised on the average daily, and then only for clearing houses in unmade roads. The regulations which came into operation on 1st April, 1932, governing the collection of trade refuse work satisfactorily and smoothly. The arrangements by which fish offal collected is deposited in special tanks at the Sewage Disposal Works, and thence removed daily in summer, and less frequently in winter, by a London firm continues in operation and causes no nuisance.

During the year the cost of incineration of refuse at the Destructor has been the subject of investigation and report by a Consulting Engineer with a view to ascertaining whether the heat produced can be increased and utilised to greater advantage by modernisation of the plant and conversion into electric energy.

Public Mortuary.—The erection of the new Mortuary in Royal Mews at the rear of the Central Police Station in Alexandra Street has been completed, and the premises will be brought into use early in 1934 as soon as the necessary equipment has been installed.

Houseboats.—The Houseboats in Leigh Creek referred to in previous annual reports continue in use as dwellings and constitute a menace to the public health and an eyesore which seriously detracts from the amenities of the front of the western area of the Borough. The additional powers secured by the City of London as the Port of London Sanitary Authority within whose area the houseboats are moored have not resulted in any improvement in the conditions, and it is surprising in view of the crusade against slum property and the expressed desire of the Government that the housing conditions of the people should be above reproach, that such an assemblance of "dwellings" without water supply, drainage, or other sanitary requirements, should continue to be tolerated by the Ministry of Health.

### Sanitary Inspection.

Complaints received and attended to	• • •			1127
Complaints referred to Highways Department	,	• • •		54
Frivolous complaints received	• • •			21
Nuisances detected without complaint				1071
Nuisances abated on notice		• • •	• • •	987
Nuisances abated without notice		• • •	•••	1193
Preliminary notices served	• • •			853
Notices not complied with but being dealt with	•••	•••	•••	14
Houses affected by notice	•••			1027
Houses inspected under Public Health Acts	,			2179

frouses, number inspected unc	ici ii	Lousing	5 ACIS	* * *	• • •	• • •	423
Statutory notices served			• • •	• • •			35
Visits of inspection made dur	ing t	he det	ection	and a	bateme	ent	
of nuisances	_						25266
Notices served under Section	17, 1	Housin	g Act.	1930			26
	,		6				
Work done in connection with the	Drai	nage o	ot Prei	nises.			
		Q ·					
Houses, drains tested:							
. After infectious diseases		• • •				• • •	641
By request on payment o	f fee		• • •		• • •		13
On complaint or alteration	on of	drain	age		• • •		694
Number of houses re-drained	• • •						146
Number of houses, drains rep	aired		***				234
Total length of drain tested	with	water					6687f
New inspection chambers bui	lt						286
New gullies fixed							322
New covers to inspection ch							248
Inspection chambers rendered							231
			• • •	• • •	• • •	* * *	
New soil pipes provided		• • •	* * 1	• • •	• • •		92
Vent pipes unblocked		• • •	• • •	•••	• • •		45
New W.C. pans and traps pro	ovide	d	•••	• • •	• • •	• • •	213
New flushing cisterns provide	led	• • •		• • •			141
New lavatory basins provide	d	• • •	• • •				73
W.C.'s made open risers							<b>4</b> 3
New W.C.'s erected							112
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Improvements ca	rried	out.					
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^	• • •		•••	• • •	•••	• • •	64
Blocked drains cleared	• • •	• • •	•••	• • •	* * *	•••	361
New sinks provided		•••	* * *	• • •			36
Defective guttering repaired	, hou	ises		• • •	• • •		114
Defective rainwater pipes repa	ired	• • •					112
Defective roofs repaired		* * *	• • •				162
	• • •						167
	• • •						41
Cement plinths to houses prov		•••	•••	•••	•••	• • •	38
•		 I	***	• • •	•••	••	43
Scullery floors repaired and			•••	•••	•••	• • •	
*	• • •	• • •	•••	•••	• • •	•••	78
Copper furnaces repaired		•••	•••	•••	•••	•••	114
New sanitary ash bins provi	ded	• • •	,	• • •	• • •		464

New gutters provided	• • •	• • •	• • •		• • •	• • •	39
Walls to houses rendered				• • •			25
New air bricks provided for	ventila	ation	under	floors	• • •		117
Sash cords renewed		• • •	•••	• • •	• • •		194
With respect to Dirty Houses.							
Houses cleansed			• • •				41
Rooms cleansed			•••				233
Ceilings cleansed	•••						162
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W.C. apartments cleansed			• • •		• • •		62
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Houses re-connected to Water	er Com	pany	's mai	ns			24
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With respect to the keeping of an	rimals.						
Removal of animals imprope	rlv ket	ot			• • •		25
Stables, yards paved or pavir				• • •			6
Pig styes cleansed and limewa							39
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cost			•••			•••	andra rete
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Schools, sanitary convenience	s, insp	ection	ıs	• • •		• • •	563
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Fishmongers' premises inspected	•••	• • •	•••	872
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Public house urinals, inspections	•••	• • •	• • •	630
Refreshment houses, inspections	• • •			713

Shops Acts.

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Drain Testing.—The drains of houses are tested whenever there is any reason to suspect any defect, and also on occurrence of any notifiable disease among the residents. Of 510 houses, the drains of which were examined as a routine measure on account of occurrence of infectious disease, 379 were found to be in good order, 106 had trivial defects, whilst in 25 instances it was considered necessary for the drains either wholly or in part to be relaid.

Disinfection of Houses.—The number of rooms disinfected during the year was 2,017 in 1,111 houses, including 404 rooms in 146 verminous houses, also 301 rooms in 173 houses after removals or deaths of patients suffering from Pulmonary Tuberculosis. The number of articles subjected to steam disinfection at the Disinfection Station was 72,407. Thirty-one Wards were disinfected at the Southend General Hospital. The utility in preventing the spread of infection of much of the work is doubtful, especially in cases of mild Scarlet Fever, but the public expects it and it doubtless ensures a thorough cleansing of the infected rooms which might not otherwise be undertaken.

Common Lodging Houses.—There is no registered Common Lodging House in the Borough, but a lodging house which the owner denies comes within the definition is subject to regular inspection to ensure that it is kept in compliance with the Bye-laws.

Offensive Trades.—The number of bone dealers remains the same, namely, four; these traders also deal in rabbit skins. Their premises, on inspection, have generally been found clean and well conducted.

The premises on the Coleman's Estate used by a fat and bone boiler have at times been a source of serious nuisance from effluvia. The premises drain to cesspools and plans have now been approved for the connection to the sewer. The occupiers have also been called upon to carry out improvements to the premises which are now far from satisfactory, both as to structure and cleanliness. The rapid development occurring in the vicinity renders it most necessary that the trade be carried on with as little nuisance as possible.

There are now 41 fish-frying premises on the register and these are all subject to routine inspection. With two or three exceptions the apparatus is of modern design and effluvium is as far as possible prevented. Twenty-three of these premises are licensed, and of these seventeen are subject to annual renewal of the licence, pursuant to Section 44 (2) of the Public Health Act, 1925.

Underground Rooms.—There are some 150 houses in the Borough with rooms which come within the definition of underground rooms, and of these 33 do not comply with the Regulations as to their use as sleeping rooms. Constant observation is kept to ensure that these rooms are not used for sleeping purposes, but during the height of the season it is frequently found that they are brought into use for a few weeks at a time. Many of these rooms could not be so altered as to make them comply with the Regulations.

Rag Flock Acts, 1911 and 1928.—No samples of rag flock were taken during the year. The upholsterers' premises have been visited from time to time, but it was found that no rag flock was being used except for the re-making of mattresses.

Factory and Workshops Act, 1921.

## I. Inspection of Factories, Workshops and Workplaces.

Iı	nspections.	No. of Written Notices.	Prosecutions.
Factories (including Factory Laundries)		10	-
Workshops (including Workshop Laundries)		8	
Workplaces other than Out- workers' premises included in Part II. of this report		13	_
		_	
Totals	1,834	31	

## II. Defects found in Factories, Workshops and Workplaces.

Nuisances under the Public Health Acts:-

			Found.	Remedied.	No. of Defects referred to H.M. Inspector	Prosecu-
	Want of cleanliness		10	10		
	Want of ventilation		2	2		
	Overcrowding	• • •				
	Want of Drainage floors	to	2	2	_	_
	Sanitary Accommodate	ion—	-			
	Insufficient		1	1		_
	Unsuitable or def	ec-	10	10	_	<u> </u>
	Not separate for se	•	3	3		_
	Other nuisances	XCS	9	9	_	
	Other offences under Factory and Wo		9	9		_
	shops Act	• • •	_			_
			_	othering.		_
	Tot	als	37	37	<del></del>	
III.	Home Work.					
	Addresses of outwork	ers 1	eceived	from employe	ers	43
	Addresses of outworke	ers re	eceived f	rom other Co	ouncils	52
	Addresses of outworke	rs fo	rwarded	to other Cou	incils	8
	Outwork in infected	_		tances		
	Orders made (Section		<i>'</i>	•••	•••	···
	Outwork in unwholese	ome	premises	, instances	•••	···
	Prosecutions	•••			•••	
	Inspection of outwork	kers'	premise	es,	* * *	153
IV.	Registered Workshop.	s on	the Reg	rister at the	end of the y	ear.
	Workshop Bakehouses	• • •	• • •	•••	•••	19
	Workshop Laundries	• • •	• • •	•••	•••	3
	Cabinetmaking Works		S	•••	•••	34
	Dressmaking Worksho		• • •	• • • • • • •	•••	$\dots$ 52
	Boot Repairing Work	shop	S	•••	•••	68
	Tailoring Workshops			•••	•••	41
	Cockle Boiling Works	shops	s	***	•••	13
	Miscellaneous	• • •	•••	•••	•••	164
	Т	otal	number	of Worksho	ps on Registe	er 394

#### V. Other Matters. Matters referred to H.M. Inspector of Factories— Failing to affix abstract ••• Action taken in matters referred to H.M. Inspector of Factories remediable under the Public Health Acts but not under the Factory and Workshops Act (Section 5) 3 Reports of action sent to H.M. Inspector 3 Underground bakehouses (Section 101) In use at the end of the year Certificates granted during the year ... VI. Bakehouses. 74 Bakehouses on Register, December 31st, 1933 New Bakehouses erected 1 . . . 2 Notices served on occupiers Bakehouses, inspections 563 . . . VII. Outworkers. Notices re unwholesome premises . . .

# PART VI.

## HOUSING.

The special characteristics of the housing conditions in this Borough have been the subject of comment in previous Annual Reports, the main points to which attention has been drawn being the absence of slums, the relatively small number of dwellings which can be considered to be in such a state as to justify Demolition Orders, the large proportion of houses which are of recent erection, the high rentals out of all proportion to the earnings of the tenants, the renting of larger houses than are needed for their own families by persons of the working classes who hope to augment their earnings by Summer letting, and the frequency with which parts of houses erected for occupation by one family are sublet either by the owner or tenant without any provision being made in the way of facilities for cooking and washing, food storage, provision of sinks, closet accommodation, etc.

Unfit Houses.—In the return submitted in 1930, 16 houses were included as likely to require demolition within five years. Of these two were demolished by the owners without notice, seven

were demolished after the making of Demolition Orders, one was the subject of a Demolition Order made in April, 1933, and is empty but still awaits demolition, the necessary steps preliminary to the making of a Demolition Order are being taken in the case of one, whilst two will be demolished shortly as the result of an improvement scheme. The remaining three houses will probably be the subject of Demolition Orders during the coming year. In addition to the 16 houses referred to, Demolition Orders have been made in respect of two other houses which have been vacated but are only partially demolished.

The Sanitary Committee have decided to make Demolition Orders in respect of 14 other houses which will lead to the displacement of 37 adults and 15 children. A recent survey indicates that the number of other houses likely to need demolition within one year, three years ,and five years respectively are as follows:—

Within.		No	of Houses.	Number Adults.	of persons to be di Children.	isplaced. Total.
One year	• • •	•••	7	14	2	16
Three years		•••	32	78	45	123
Five years			44	113	73	186

As has been remarked in previous reports, relatively little old property remains, the houses being demolished by the owners as the development of the town has rendered it possible to utilize the sites to better advantage. There are a number of houses near the front in the old portion of Leigh-on-Sea and a few in the older portion of Southend and Prittlewell which are becoming no longer suitable for human habitation and these form the majority of the houses noted above as shortly needing demolition, the remainder being houses in the areas of Shoeburyness and Eastwood which were added to the Borough on October 1st.

Overcrowding.—Very few instances of serious overcrowding come under notice except during the season, when some householders receive so many summer visitors that the accommodation reserved for their own families is totally insufficient. In the great majority of other instances, the overcrowding is due either to the occupier of a house sub-letting a portion to another family and retaining insufficient for his own needs, or to a large family crowding into two or three rooms in a house sub-let to them by the tenant. The service of a sanitary notice almost invariably results in abatement of the overcrowding.

Sub-letting.—This is extremely prevalent, particularly on building estates which have been developed within the last twenty years. Owing to the high cost of land and doubtless other considerations, very few houses have been erected during this period to be let at a rental which can be paid by a wage earner, with the result that in the great majority of houses erected by private enterprise in recent years and occupied by persons of the working classes two or more families reside. In a few instances, owners have made suitable alterations and by converting the house into two self-contained flats have catered for the modern tendency to avoid large houses and to limit the accommodation rented to that necessary to house under comfortable conditions a small family. In the great majority of cases, however, no attempt has been made to provide the additional sanitary and other accommodation necessary in a house occupied by two or more families, with the result that a large number of the residents are living without necessary amenities and under conditions which must necessarily seriously interfere with ordinary comfort and cleanliness and render a reasonable home life impossible of attainment.

As will be seen later, the person responsible for the use of a house by two or more families is not infrequently the tenant, who often charges a rental for a part of the house which is disproportionate to the rental he pays to the landlord. In some instances, the sub-tenant shares with the tenant the use of the kitchen, scullery, copper, etc., but this not infrequently leads to strife, necessitating a visit by one of the Sanitary Inspectors to adjust differences between the housewives.

Some typical examples of conditions resulting and the rentals obtained from sub-letting are as follows:—

(1) Five houses in Whitegate Road, each of which has been let by the owner to three families. The front and middle rooms on the ground floor are let at 18s. per week; the tenant has no foodstore, sink or copper, water has to be obtained from a tap in the garden, all waste water being disposed of in the gully beneath, and there are no facilities for cooking other than a gas stove placed in one of the rooms which is used as a bedroom. The kitchen and scullery on the ground floor are let as a separate tenement at a weekly rental of 13s., the only entrance being through the scullery, and the occupiers sharing the outside W.C. with the tenants of the front and middle rooms. The first floor of four rooms and a bathroom is let at 25s. per week; a sink and gas stove have been provided in the bathroom, the bath having been removed; there is no access to garden, no food store, and no copper, although the tenants have the use of the W.C. on the first floor.

- (2) Four houses in Central Avenue, the owner of which lets each floor to a separate family, each of which pays a weekly rental of £1. The ground floor tenants have two rooms, and a kitchen and scullery with sink, copper, food store, and outside W.C. The first floor tenement comprises two rooms, a small box room, and a kitchen containing a gas stove; the sink and water supply are in the W.C. apartment, and there is no food store; the tenant shares the use of copper in scullery on ground floor once a week.
- (3) Two houses in Durham Road, each of which is let by the owner to two tenants, who occupy ground floor and first floor respectively. The ground floor tenements let at a rental of 17s. 6d. weekly and 18s. 6d. weekly respectively, consist of two rooms and scullery in which are placed a gas stove, copper, sink, and a water tap with a W.C. in yard. The first floor tenements, let at similar rentals, consist of two rooms, a small kitchenette containing gas stove and a W.C. apartment which is also used as a scullery, the lavatory basin being used as a sink; there is no copper or food store, but the tenant has access to the copper in the scullery of ground floor tenement.
- (4) A house in Brightwell Avenue, sublet by owner as two tenements, the ground floor consisting of two rooms and scullery, containing copper, sink and gas stove, with W.C. in yard, is let for 15s. per week. The first floor of two rooms with bathroom containing W.C. is let at a similar rental; the only facilities for cooking are by means of a gas stove which is placed in the bathroom, while there is no food store.

In the majority of instances which come under notice the occupier of one of the tenements in a house sub-let to two or more families has no proper facilities for cooking, not infrequently any cooking having to be done on a gas ring placed in a bedroom or on the open fire of a living room or on a gas cooker placed on the landing or in a room used at night as a bedroom or in the bathroom which sometimes also contains the W.C. Lavatory basins, or baths have to be used as sinks. There is no provision for food storage, with the result that wooden boxes, often placed in a bed-sitting room, are used for this purpose. Except when there is an arrangement by which there is joint use of the copper, there are no facilities for washing clothes. It is clearly impossible for parents to bring up a family satisfactorily under such conditions, or indeed for them to create anything which can be called a home.

As will be seen the rentals paid for the meagre accommodation provided are often most excessive. Other examples are as follows:—

Rent of house 35s. weekly inclusive. Two rooms with use of W.C. sublet for 13s. 6d. Gas stove for cooking on landing; water from bathroom; no facilities for washing; no food store.

Rent of house £10 7s. quarterly, exclusive of rates. Two rooms sublet by tenant for 12s.; no sink; cooking by gas stove on landing; no copper; shares bathroom containing W.C., the bath being used as a sink; no food store.

Rent of house £2 per week inclusive. One bed-living room and kitchenette on first floor were let for £1 weekly, whilst another room on same floor was let as an unfurnished bed-sitting room for 10s. weekly, although there were no other conveniences apart from joint use of W.C.

Rent of house 12s. 9d. per week inclusive. Tenant has sublet two rooms on first floor with joint use of scullery for 10s. weekly, retaining for the use of his family the two rooms on ground floor and a bedroom on first floor.

The only explanation why such high rentals are obtained for two or three rooms without the amenities essential for comfort is the fact that there is an almost entire dearth of houses available at a reasonable rent. Persons of the working classes have become tenants of houses the rentals of which are much above their means and can only be paid if part of the house is sub-let, often at an exorbitant figure.

The Council, unlike the great majority of Councils of other similar towns, has not adopted bye-laws controlling the letting of houses in tenements, notwithstanding the advice given to them on several occasions that their officers are unable without such byelaws to ensure that houses built for occupation by one family should not be let to two or more families unless proper sanitary and other essential accommodation is provided for each of the Had the Council adopted such bye-laws it is obvious that thousands of houses built in recent years would have been erected either so as to be capable of being let at a rental within the means of the average wage earner, or in the alternative, have been constructed as two self-contained flats, each with all the facilities necessary for family life. As a result of the failure of the Council to obtain powers to control the letting of houses in tenements, builders have continued to erect houses as if for occupation by one family, even though it was obvious that the great majority would house two or more families. Unfortunately many of the houses have been so built that it would now be difficult to convert them into entirely suitable self-contained flats.

It appears absurd to demolish houses which have become too dilapidated for repair but which still provide reasonable facilities for cooking, washing, etc., while at the same time conditions such as those described above are allowed to prevail in recently erected houses.

Rentals.—Except in Shoeburyness and Eastwood, the areas recently added to the Borough, the rentals of houses are exceptionally high and with the exception of the occupiers of controlled houses, all wage earners pay a disproportionate amount of their income in house rent. In enquiries made into the financial circumstances of patients admitted to the Municipal Hospital it is not infrequently found that persons of the working classes earning about £2 10s. 0d. per week pay an inclusive weekly rental of about 25s, even though the size of the family or the accommodation available precludes sub-letting of any of the rooms.

General.—The recent Housing Acts clearly throw on the Local Authority the onus of providing housing accommodation for the working classes when such provision is not made by private enterprise or is otherwise available; there is also an obligation on the Local Authority to provide under similar circumstances housing accommodation for persons displaced as a result of the making of Demolition Orders, and in instances in which such persons cannot pay economic rentals for Municipal houses, to erect houses, the rentals of which are in part rent-aided.

In spite of the Housing Schemes adopted by the Council, there is clearly necessity for the erection of a large number of additional houses, seeing that private enterprise has failed to produce houses of the type required.

It is, however, the unanimous opinion of the Council's Officers engaged in the work of House-Inspection that the first steps which should be taken by the Council is the obtaining of powers to control subletting; the enforcement of byelaws similar to those submitted for the provisional approval of the Ministry of Health some years ago would lead to estate owners either building houses capable of being let to one family at a reasonable rental or, if the cost of the land or other considerations render this impossible, erecting houses on the self-contained flat principle.

Van Dwellers.—The matter of dealing with the insanitary conditions which result from the use of vans, sheds, converted 'buses, etc., has received considerable attention during the last

quarter of the year in view of the fact that a considerable number of such improvised dwellings exist in the added area of Eastwood on two estates known as the Bohemia and Grosvenor Estates respectively.

The Sanitary Committee are taking the necessary steps to make Demolition Orders in respect of five such "dwellings" in other parts of Eastwood which comprise seven vans and one shed housing nine adults and six children and propose as soon as the necessary information is available to recommend the making of similar orders in respect of the "dwellings" on the two estates named, particulars of which are as follows:—

	No. of	Vans	Conver- ted Buses	Sheds or	Persons to be displaced.			
	Families Va	vans	Etc.	Shacks	Adults	Children	Total.	
Occupied —								
Grosvenor Estate	32	15	19	6	73	40	113	
Bohemia Estate	82	57	6	22	160	103	263	
Other Areas	12	6	5	2	25	18	43	
Total	126	78	30	30	258	161	419	
Unoccupied—								
Grosvenor Estate		5	6	4	•••		•••	
Bohemia Estate		2	1	2			•••	
Grand Total	126	85	37	36	258	161	419	

The conditions under which the residents in these improvised dwellings live are most unsatisfactory, as will be seen from the following report on the Grosvenor Estate.

Of the 45 habitations on wheels, 25 can be moved, 15 cannot be moved, while in the remaining instances it is doubtful whether the vehicles can be moved or not. The dwellings on wheels comprise 23 caravans, 11 single deck motor 'buses, three roughly constructed sheds on wheels, five pantechnicon vans, one railway carriage, one horse-drawn tram car, one motor trailer. Four of the habitations are used for sleeping purposes only, the occupants having their meals and living in other habitations adjoining. Nine are used for summer residence only.

In only seven instances can the water supply be considered satisfactory. In the majority of instances water is obtained from a local shop, the shopkeeper charging a penny for a pail of water, and as the pail holds less than a gallon this price is exorbitant. The shopkeeper

obtains water partly from the Company's mains and partly from an ill-constructed well 400 yards distant from the shop, the water being conveyed thereto in a refuse-bin on wheels. He also supplies van dwellers with water from a rain water tank which receives water from the roof of a glass house and shed; the water is supplied without charge on the understanding that it is not used for drinking purposes for which it is clearly unfit as surface water from the yard finds access to the tank. Of nine shallow wells on the estate which serve some of the vans, in only one is the well constructed so that it is protected from contamination by surface water. Having regard to the large amount of the contents of pail closets buried in the ground immediately adjoining, it is probable that the majority of the wells are badly polluted.

Pail closets are in general use, being placed in roughly constructed shacks or in large packing cases placed on end; the closets are not paved, and the ground in and immediately adjoining the apartments is very foul. The contents of the pail closets are deposited in a shallow pit in the immediate vicinity, which is then filled with earth.

Waste waters are disposed of by being thrown on the ground in the immediate vicinity of the habitations; in only eight instances were suitable bins in use for house refuse, which is ordinarily disposed of by dumping in the adjoining hedges and ditches; only one habitation had a sink, the waste from which, however, discharges into the roadway. Five of the dwellings are provided with coppers.

The cooking arrangements are not unsatisfactory, but there is no provision for food storage. Of the 33 habitations, particulars of which are available, 22 were overcrowded, nine were seriously damp, four were insufficiently ventilated, whilst in six the natural lighting was seriously deficient.

The ground in the vicinity of the vans, sheds, etc., is during the wet season very sodden and muddy, with the result that the floors of the dwellings are generally in a very wet and dirty condition. A brook which runs through the estate is at times used for the disposal of the contents of the pail closets; refuse of all kinds is thrown into it, and its condition is foul.

The existence of such insanitary conditions seriously detracts from the amenities of the area and prevent its development. In the interests of adjoining residents and of the van-dwellers themselves it is most urgent that appropriate steps be taken to end such conditions.

### Housing Statistics.

- I. Inspection of Dwelling-houses during the year.
  - (1) (a) Total number of Dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... 2880
    - (b) Number of inspections made for the purpose ... ... 3577

		Number of Dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	325
	(b)	Number of inspections made for the purpose  Number of Dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	1100
	(4)	Number of Dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	253
11.	Remedy	of Defects during the year without service of formal notices.	
		Number of defective Dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	227
Ш	Action	under Statutory Powers during the year.	
		Act, 1930.	
	(1)	Number of Dwelling-houses in respect of which notices were served requiring repairs	26
	(2)	Number of Dwelling-houses which were rendered fit after service of formal notices:	20
		(a) By owners (b) By local authority in default of owners	26
	B—Pro	oceedings under Public Health Acts.	
	(1)	Number of Dwelling-houses in respect of which notices were served requiring defects to be remedied	35
	(2)	Number of Dwelling-houses in which defects were remedied after service of formal notices:	
		(a) By owners (b) By local authority in default of owners	35
		occeedings under Sections 19 and 21 of the Housing Act, 1930.	
	(1)	Number of Dwelling-houses in respect of which Demolition Orders were made	3
	(2)	Number of Dwelling-houses demolished in pursuance of Demolition Orders	2
	D—Pro	occeedings under Section 20 of the Housing Act, 1930.	
	(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	-
	(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	

E—Proceedings under Section 3 of the Housing Act, 1925.	
(1) Number of Dwelling-houses in respect of which notices were served requiring repairs	
(2) Number of Dwelling-houses which were rendered fit after service of formal notices:  (a) By owners	
(b) By local authority in default of owners	
(3) Number of Dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations	
by owners of intention to close	
F—Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925.	
(1) Number of Dwelling-houses in respect of which Closing Orders were made	
(2) Number of Dwelling-houses in respect of which Closing Orders were determined, the Dwelling-houses having been rendered fit	
(3) Number of Dwelling-houses in respect of which Demolition Orders were made	
(4) Number of Dwelling-houses demolished in pursuance of Demolition Orders	_

# PART VII.

## INSPECTION AND SUPERVISION OF FOOD.

A.—The Milk Supply.

Milk and Dairies Order, 1926.

The following table shows the number of premises, of inspections, and of notices served during the year:—

Nature of Premises,	No. of Premises.	No. of Inspections.	No. of Notices Served,
Cowsheds	15	103	2
Dairies	62	654	1
*Other shops .	439	711	4

<sup>\*</sup>These shops are not liable to registration as Dairies because milk is sold either in sealed bottles only or for consumption on the premises only.

The above numbers include the ten cowsheds, four dairies and eight milksellers in the added areas of Shoeburyness and Eastwood.

Pursuant to Article 8 of the Milkshops and Dairies Order, 1926, the Corporation's Veterinary Inspector inspected all cattle on the premises of each of the cowkeepers in the Borough, examining 446 cows and heifers, all of which, with the exception of one cow, were reported to be free from clinical evidence of tuberculosis.

The Milk (Special Designations) Order, 1923.

Licences have been issued by the Council pursuant to this Order as follows:—

	No. of Premises Licensed,
To bottle and distribute Grade A Milk	4
To distribute Grade A Milk, bottled in the Borough, 12,	
bottled outside the Borough, 3	15
To bottle and distribute Grade A (Tuberculin Tested)	
Milk	1
To distribute Grade A (Tuberculin Tested) Milk, bottled	
in the Borough, 9, outside the Borough, 1	10
To Pasteurize Milk	5
To distribute Certified Milk	1

Samples of graded milks are taken at regular intervals, and when the sample is found not to be in accordance with the standard laid down, communications are at once sent to the vendors calling upon them to investigate the causes which have led to the milk falling below the standard.

The premises of a dairy farmer licensed by the Essex County Council to produce Grade A milk, are situate in the area added to the Borough on October 1st, and are regularly inspected.

Four of the thirty-seven samples of Grade A milk taken, one of the nine samples of Grade A (Tuberculin Tested) milk, and one of Certified Milk, failed to comply with the standards, whereas the samples of Certified Milk and of Pasteurized Milk were well within the specified limits,

B.—Meat.

Slaughterhouses.

With the taking over of Shoebury and part of Eastwood, three additional slaughterhouses have been added to the number of slaughterhouses in the Borough which now number ten, four of which are subject to annual licence. 2,542 visits were paid by the Inspectors during the year, and the premises were found generally to be well conducted, and no notices were necessary.

Public Health (Meat) Regulations.

The Regulations are well observed, practically all the retail butchers having made special provision by means of glass fronts to protect their meat from contamination by dust, etc.

Notification of intended slaughter were received on 336 occasions, and the carcases examined by the Inspectors numbered 18,685, viz.:—Beasts 937, sheep 9,026, calves 1,603, pigs 7,119.

Practically all the butchers now consent to the carcases slaughtered for them being stamped by the Meat Inspectors after examination at time of slaughter.

The following carcases brought into the Borough from outlying districts were also examined at the shops of butchers, viz., pigs 3,459, beasts 420, sheep 1,377 and calves 649.

Unsound Food.—The following table shows the quantity of unsound food of various kinds which were surrendered during the year:—

Carcases, Meat, etc.

Tuberculous ... Carcases of pigs 18, of cows 10, of calves 2.

Joints of beef—587 lbs.

Heads of pigs 68, of cows, bullocks, etc., 19. Plucks of pigs 18, of cows, bullocks, etc., 17.

Abscesses ... Pork 36 lbs., beef 21 lbs., lamb 20 lbs., 1 heifer's liver.

Bruised ... Beef  $267\frac{1}{2}$  lbs., pork 61 lbs.

Cirrhosis ... Livers of pigs 6, of bullocks 1.

Decomposing ... Carcase of pig 1, of sheep 1, 235 lbs. pork, 46 lbs. suet, 40 lbs. mutton, 8 sheeps' plucks

Dirty ... Pork 20 lbs.

Echinoccus Cysts Bullock's pluck 1.

Emaciated ... Carcases of pigs 7, of cows 2, of calves 1.

Fatty Degeneration Liver 212½ lbs.

Fevered ... Carcases of calves 2.

Heated ... Beef 1077 lbs., pork 120 lbs., mutton  $16\frac{1}{2}$  lbs.

Jaundiced ... Carcase of calf 1.

John's Disease ... Carcase of cow 1.

Melanosis ... Calf's pluck 1.

Mouldy ... Lamb 54 lbs., calves' livers 92 lbs.

Moribund ... Carcase of sheep 1.

Peritonitis ... Carcase of calf 1, of pig 1.

Pneumonia and

Pleurisy Carcase of pig 1.

Septic Pneumonia Carcase of sheep 1.

Total—51 carcases, 2,906 lbs. of joints, etc., 87 heads, 45 plucks, 8 livers.

#### Tinned Food.

Milk	$\dots$ 226 tins.	Chicken and Ham	3 tins.
Beef	46 tins.	Herrings in Tomatoes	3 tins.
Salmon	18 tins.	Pigs' kidneys	3 tins.
Paste	9 tins.	Eggs	2 tins.
Lambs' livers	7 tins.	Asparagus	2 tins.
Sheeps' tongues	7 tins.	Lambs' sweetbreads	1 tin.

#### Fish.

Dog fish	 	18 stone.	Kippers	 	$14\frac{1}{2}$ boxes.
Skate	 	$19\frac{1}{4}$ stone.	Haddocks	 	4 hoxes.
Cat fish	 	$5\frac{1}{2}$ stone.	Lobsters	 	11 lbs.
Sand dabs	 	4 stone.	Mussels	 	½ bag.

#### Miscellaneous.

Rabbits	 168 lbs.	Oranges	 	2 cases.
Potatoes	 94 lbs.	Pears	 	2 cases.
Tripe	 5 lbs.	Apples	 	1 case.
		Chicken	 	1 carcase.

One retail butcher was prosecuted for being in possession of diseased meat, and was fined  $\pounds 20$  and costs.

Food and Drugs (Adulteration) Act.—The number of samples submitted to the Public Analyst was 413 (formal 334, informal 79) and of these 21 (17 formal, 4 informal) were reported to be non-genuine, viz., 15 of the 212 samples of milk, 2 of the 3 formal and 3 of the 9 informal samples of Parrishes Food and the one informal sample of raising powder.

The 392 (317 formal, 75 informal) samples found to be genuine, comprised samples as under, the figures in brackets representing the number of formal samples included in the total:—

Milk 204 (197), Margarine 30 (22), Butter (29), Minced Beef (11), Beef Sausages (10), Cream 9, Pearl Barley 8 (7), Parrish's Food 7 (1), Lard (6), Mint 6, Baking Powder 5, Sponge Cake 5, Ground Almonds (5), Pork Sausages (4), Luncheon Sausages (4), Tea 4 (2), Essences 4, Custard Powder 3, Camphorated Oil 3, Egg Substitute 3, Cocoa (3), Icing Sugar (3), Malt Vinegar (3), Wood Vinegar (3), Breakfast Sausage (2), Shredded Suet (2), Meat Paste 2, Fish Paste 2, Selfraising Flour 1, Rice 1, Bloater Paste 1, Olive Oil 1, Brawn (1), Jam 1, Pickles 1, Arrowroot 1, Cake Powder 1, Tinned Salmon 1, Cane Sugar (1), Demerara Sugar (1).

Proceedings were taken against the vendors of five non-genuine milk samples, with the following results:—

No.	Result of Analysis.	Result of Proceedings.
4361	5.41% added water.	Dismissed on payment of costs.
4362	8.35% added water and $5.09%$ fat abstracted.	Dismissed on payment of costs.
4376	13.3% fat abstracted.	Dismissed—Hunt v. Richardson.
4381	9.7% fat abstracted.	Dismissed— do.
4554	6.3% fat abstracted.	Fined £1.

In the case of one sample of milk No. 4356 which the Public Analyst reported contained 8.01 per cent. of added water, no action was taken, in view of the proceedings against the farmer in respect of samples No. 4361 and No. 4362, which were taken at the request of the dairyman in course of delivery from the farmer.

In the remaining nine instances of non-genuine milk samples cautions were administered, the results of analysis being as follows:—

```
Added Water, 1.88%, 0.59%.
Fat abstracted, 5.0%, 3.0%, 2.3%, 5.0%, 1.67%, 3.0%, 1.67%.
```

Of the five samples of Parrishes Food reported to be non-genuine, three of the samples were informal; formal samples were subsequently taken from the traders concerned, and in two instances proceedings were instituted against the vendors with the following results:—

No.	Result of Analysis.	Result of Proceedings.
4622	.2% deficient in Ferrous Phosphate and .18% deficient in Calcium	T' 1 00 1 1 7
4623	Phosphate23% deficient in Ferrous	Fined $\pounds 2$ and 15s. costs.
	Phosphate.	Fined £2 and 15s. costs.

A caution was also administered in the case of an informal sample of raising powder, the result of the analysis showing that the sample was 51.7 per cent. deficient in carbon dioxide.

Merchandise Marks Act.—Frequent observations are kept on traders for the enforcement of the Act, and although cautions have been necessary from time to time, it is found on the whole that the Act is fairly well observed. Legal action has not been taken against any of the traders.

# PART VIII.

## INFECTIOUS DISEASES.

SECTION I. Notifiable Diseases.—The following table shows the number of notifications of infectious diseases which were received during the year:—

Disea	se.			Total Cases notified.	Cases admitted to Hospital.	Total Deaths.
Smallpox	••••	••••	••••	• •	• •	• • )
Scarlet Fever		****	••••	466	277	1
Diphtheria	••••	****	****	77	77	6
Enteric Fever	••••	••••	••••	5	4	• •
Puerperal Fever		••••	••••	6	3	1
Puerperal Pyrexia	••••	••••	••••	16	12	1
Erysipelas	••••	••••	••••	38	6	• •
Ophthalmia Neonato	rum	••••	••••	15		
Anterior Poliomyeliti	s	••••	••••	1	• •	
Cerebro Spinal Menin	gitis			2	2	• •
Pneumonia	••••			161	23	63
Malaria	••••	••••	••••	2	1	

Scarlet Fever.—Of the 466 cases of this disease which came under notice, approximately one-half were notified in the last quarter, the numbers in each of the four quarters being 45, 74, 112 and 235 respectively. The disease was of the mild type prevalent in recent years, and only one death resulted, the deceased being a child aged 18 months who died from Broncho-pneumonia. The unusual heavy incidence led to the accommodation at the Isolation Hospital being severely taxed, especially during the last quarter. The total number of admissions to hospital was 277, admission being limited to patients who on account of the severity of disease or development of complications needed nursing or surgical treatment, or to those who could not be isolated at home owing to lack of accommodation, illness of mother, or other causes.

Diphtheria.—There were six deaths from this disease among the 77 notified patients, all of whom were treated at the Borough Sanatorium. In the majority of the fatal cases medical aid had not been sought owing to failure on the part of the parents to recognize the gravity of the illness until a late stage of the disease, the patients dying from either toxaemia or heart paralysis, in spite of antitoxin treatment. No Clinic for the active immunization of children from Diphtheria has as yet been established in the Borough.

Enteric Fever.—No case of Para-typhoid Fever came under notice during the year, but in December notifications of five cases of Typhoid Fever were received. These patients all resided in adjoining streets in the Leigh area of the Borough; three houses were involved, the person in attendance on the first case in each of two houses also developing the disease, having become infected prior to the nature of the ailment being recognised. of infection in the three primary cases was not ascertained; no shellfish or water-cress or other article of food commonly associated with outbreaks of Typhoid Fever had been consumed; the milk supply was common to the three houses but no cases occurred among the other customers of the dairyman, whose employees gave no history of illness and were not "carriers" as judged by bacteriological examination of their excreta. The source of infection consequently remains a mystery. One patient was treated at his home but the other patients were treated in hospital and all recovered.

Malaria.—Two cases of this disease were notified in September, one being a patient who had returned in June to his home in the Borough from Nigeria on contracting the disease in the preceding month. The other patient was an adult who had not been abroad but who developed the disease shortly after his return from a holiday in the Midlands. He gave an account of being bitten by mosquitos whilst on holiday but on enquiry it was ascertained that no cases of malaria had occurred in that area for many years and it is not apparent when the patient became infected.

Cerebro Spinal Meningitis.—The two cases of this disease notified were in-patients at the Southend General Hospital, both of whom recovered.

Anterior Poliomyelitis.—The only patient notified to be suffering from this disease was a girl aged 12 who, after a few days' absence on account of a febrile illness, returned to school with a limp which was found to be due to an attack of infantile paralysis affecting the right leg. She was in due course referred to the Orthopaedic Department of the Southend General Hospital and received appropriate treatment.

Puerperal Fever.—Six cases of Puerperal Fever were notified during the year, all developing after confinements at the patients' homes. There was no connection between the cases only two of which had been attended by midwives. Three of the patients were admitted to the Municipal Hospital and all recovered.

Puerperal Pyrexia.—Sixteen cases of Puerperal Pyrexia were notified, one of whom died. Five of the patients had been confined at the Southend General Hospital, one at a London Hospital, three at local Maternity Homes, and the remaining seven at their own homes, five of the latter being subsequently admitted to the Municipal Hospital for treatment.

In two of the cases, the pyrexia followed a miscarriage and in at least four of the remaining cases the subsequent course of the disease shewed that the pyrexia was probably due to the puerperal sepsis, and that the cases should more appropriately have been notified as Puerperal Fever.

Ophthalmia Neonatorum.—The following table in the form required by the Ministry of Health shows the particulars as to the 15 cases of Ophthalmia Neonatorum which were notified:—

Notified.			Vision Un- impaired.	Vision Vision Impaired.		Deaths.
15	15		14	1		_

Of the fifteen cases classified as treated at home, six attended for out-patient treatment at the Borough Sanatorium, receiving treatment on 45 occasions. Seven were infants delivered by midwives, one having 3 cases, one 2 cases, and two 1 case; the remaining eight cases occurred in the practice of doctors, one having 3 cases, one 2 cases, and three 1 case. The infant whose vision was impaired had been born outside the Borough and had had a small peripheral ulcer of the cornea which resulted in slight haziness of the cornea.

# SECTION II. VACCINATION ACTS, &c.

The Vaccination Officer has submitted the following returns to the Registrar General:—

A. Return showing number of persons successfully vaccinated and re-vaccinated at the cost of the rates during the year ended 30th September, 1933.

	Success				
District.	Under one year of age.	One year of age and upwards.	Total.	Successful Re-Vaccina- tions.	
Southend East	•••	56	17	73	5
Southend West	•••	76	19	95	96
Leigh-on-Sea	•••	27	6	33	2
Totals	•••	159	42	201	103

B. Return respecting Vaccination of Children whose births were registered during year 1932.

Number of births registered	1159	Postponement on Medical
Successfully vaccinated	325	certification 10
Insusceptible of Vaccination	1	Removal to other districts—
Had Smallpox	•••	Known 6
Statutory Declaration of Con-		Unknown 35
scientious Objection	714	Unaccounted for 27
Died unvaccinated	41	
Number of certificates	of succe	essful primary vaccination of
children under 14	received	during 1933 329
Number of statutory de	claration	ns of conscientious objections
received during 19.	33	662

Public Health (Smallpox Prevention) Regulations, 1917. — No smallpox contacts were vaccinated by the Medical Officer of Health during the year in accordance with these regulations.

#### SECTION III.

#### TUBERCULOSIS.

The following table gives particulars of all new cases of Tuberculosis, and of all deaths from the disease during 1933.

Age Periods.	Pulm	New onary	Cases. No Pulmo	on- onary	Pulm	Donary	Deaths. Non- Pulmonary		
Periods.	M	F	M	F	M	F	M	F	
0 1 5 10 15 20 25 35 45 55 65 and upwards	  1 5 20 28 19 14 6	1 3 13 31 16 3 4	1 4 4  1 	- 4 - 2 1 3 - -	  4 7 9 12 8		1 1   1  	1 1 1 1 -	
Totals	94	73	11	10	43	37	3	4	

The non-notified deaths numbered 18, or 20.6 per cent., 16 (12 Pulmonary and 4 Non-pulmonary) being ascertained from the Death Returns, while two were post-humous notifications. Enquiry is invariably made of medical practitioners as to the reason for failure to notify.

Notifications.—During the year 167 primary notifications of Pulmonary Tuberculosis (94 males and 73 females) were received, and 21 cases of Non-Pulmonary Tuberculosis (11 males and 10 females). There were also received 17 duplicate notifications, 15 of Pulmonary Tuberculosis, and 2 of Non-Pulmonary Tuberculosis.

The following table shows the Ward Incidence of the Primary Cases notified during the year:—

Ward		Pulmonary	Non-Pulmonary	Totals
Chalkwell Westborough Milton Victoria Pier Prittlewell Southchurch Thorpe Leigh St. Clements	 	14 33 8 18 22 11 25 9 18	2 5 2 1 1 1 4 2 2 2	16 38 10 19 23 12 29 11 20 10
Totals	 	167	21	188

The number of cases of Tuberculosis remaining on the Notification Register on December 31st was as follows:—

	Pulmonar	y	N	Grand		
Males	Females	Total	Males #	Total	Total.	
309	288	597	55	66	121	725

The following table shows the Part of the Body affected in the Primary Cases notified on Form A in 1933:—

Part of	Affec	Males	Females	Total			
Lungs			••••		94	73	167
Peripheral Gland	is	••••	••••	••••	4	3	7
Peritoneum	••••	••••	••••	••••	4	3	7
Joints	••••	••••	••••	••••	1	3	4
Brain and Menir	iges	••••	••••	•••			
Bones		••••	••••	••••	1	_	1
Skin	• • • •	••••	••••	••••			
Genito-Urinary	• • • •	••••	****	••••		1	1
Ischio-Rectal	••••	••••	••••	••••	1	—	1
			Totals		105	83	188

No action was necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or under Section 62 of the Public Health Act, 1925.

Institutional Treatment was provided under the Council's Scheme for 152 patients as under:—

Pulmonary	Ad	ults	Child	ren	Total
1 dimonal y	M	F	M	F	Iotai
Municipal Hospital—Milton & Hadleigh Wards  Borough Sanatorium ("Allen" Block)  Benenden  Grosvenor  Brompton Hospital  Victoria Park  Wyton  Lenham  Black Notley  Royal National Hospital Ventnor  Preston Hall	36 18 15 2 1 1 1	30 15 4 4 1 2 - 1 1			66 33 19 6 2 2 2 1
Totals	74	58		2	134
Non-Pulmonary	Adults		Chil	Total	
	M	F	M	F	
Heatherwood St. Vincent's, Pinner Royal Sea Bathing Hospital Alton Stanmore St. Anthony's, Cheam Leysin Switzerland			1 6  1 	1 3 - 1 1 -	2 9 1 1 2 2 1
Totals	3	1	8	6	18

TABLE I.

Return showing the work of the Dispensary during the year 1933.													
Diagnosis.	Pulmonary. Adults Children							TOTAL. Adults   Children				Grand Total	
	M	$\overline{\mathbf{F}}$	M	F	M	F	$\mathbf{M}$	F	$\mathbf{M}$	F	M	F	
<ul> <li>A.—New Cases examined during the year (excluding contacts):</li> <li>(a) Definitely tuberculous</li> <li>(b) Doubtfully tubercu-</li> </ul>	52	35		1	•••	2	3	2	52	37	3	3	95
lous (c) Non-tuberculous B.—Contacts examined	••••	••••		••••		••••			$3\frac{1}{4}$	$\begin{vmatrix} 3 \\ 60 \end{vmatrix}$	$egin{pmatrix} 1 \\ 45 \\ egin{pmatrix} 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 $	36	$\begin{array}{ c c }\hline 5\\175\\ \end{array}$
during the year:— (a) Definitely tuberculous (b) Doubtfully tubercu-	1	3	••••	••••	••••	••••	****	•••	1	3	••••	••••	4
lous (c) Non-tuberculous c.—Cases written off the			••••		••••				16	28	33	29	106
Dispensary Register as  (a) Cured  (b) Diagnosis not confirmed or non-tuberculous (in-	4	5	2	1	2	••••	7	4	6	5	9	5	25
cluding cancellation of cases notified in error) D.—Number of Persons on Dispensary Register on	••••			••••			••••	••••	50.	88	79	66	283
December 31st:— (a) Diagnosis completed	241	217	10	11	7	15	37	39	248	232	47	50	577
(b) Diagnosis not completed		.;							1	3	1		5
1. Number of persons on Dispensary Register on January 1st								)					

			pensary	
588		1st	January	
			Number of	2.
	ner areas			
	ight of "			
84	••••	urned	cases ret	
	ts trans-	patie	Number of	3.
	areas and	other	ferred to	
104	t of ''	ost sigl	cases "1	
63	ar	g the y	Died during	4.
	ances at	atten	Number of	5.
	including	ensary	the Disp	
2,040		)	Contacts	
	Persons	Insure	Number of	6.
	ry Treat-	omicilia	under D	
	t Decem-	the 31:	ment on	
61			ber	
	ultations	f con	Number o	7.
	ractition-	dical p	with me	
			ers:—	
31			(a) Persona	
62		ise	(b) Otherw	

8. Number of visits by Tuberculosis Officers to Homes	540
9. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	700
10. Number of  (a) Specimens of sputum, &c., examined  (b) X-ray examinations	444
made, in connection with Dispensary work	445
11. Number of "Recovered" cases restored to Dispensary Register	••••
12. Number of 'T.B. plus' cases on Dispensary Register on the 31st December	284

TABLE II.

RESIDENTIAL INSTITUTIONS.

Return showing the Extent of Residential Treatment during the Year 1933.

Institutions	on Dec. 31.	25	15	10	50
Died in the	Institutions.	20	15		35
Discharged during the	year.	32	6.	4	65
Admitted during the	year.	59	40	4	103
Institutions	on Jan. 1.	18	19	10	47
		SIII Z	ubA E	Children	
			Managhan of Dationts		Total

## TABLE III.

Return showing the immediate results of Treatment of Patients discharged from Residential Institutions during the year 1933.

Nasa Dana		T		D		T		
Peri- pheral Glands	Other Organs.	Abdo minal	Bones and Joints	Class T.B. plus. Group 3.	Class T.B. plus. Group 2.	TUBERCU Class T.B. plus. Group 1.	Class T.B. minus.	Classification on admission to the Institution.
Quiescent Not Quiescent Died in Institution	Quiescent Not Quiescent  Not Quiescent  Died in Institution	Quiescent  Not Quiescent  Died in Institution	Quiescent Not Quiescent Died in Institution	Quiescent Not Quiescent Died in Institution	Quiescent Not Quiescent Died in Institution	Quiescent Not Quiescent Died in Institution	Quiescent Not Quiescent Died in Institution	Condition at time of discharge.
				3 L :	6 1	13 12 7 3	2 2	Under 3 months.  M. F. Ch.
					1 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 4 1	1	Duration of Residential der 3 months.  F. Ch. M. F. Ch.
					1 2	2 1	1 1 2	<u> </u>
	1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 L 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1		Treatment in the Institution.  6—12   More than 12   months.  M. F. Ch.   M. F. Ch.   N
	1		2 2	3	3 4 6 9	3 1 22 17 8 5	1 2 2 2 4 1 1	TOTAL.
	1		<b>19</b> : 19	3 3	157	4 39 13	ಬರು	GRAND TOTALS

## TABLE IV.

## (A) PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary at the end of 1933, arranged according to the years in which the patients first came under Public Medical Treatment for pulmonary tuberculosis, and their classification as shown on Form A.

		sn:	reviou Clas	s to 1		s	15		1926 ass T.	B. plu	s	S 1		927 ss T.E	3. plu	s	ıs		)28 ss T.E	. plus	S		.929 ss T.B	. plus	v		1930 Class	T.B.	plus	sn	Clas	931 s T.B.	plus		18	193 Class	2 Г.В. р	lus	sn	Cla	1933. ss T.	B. plu
ondition at the time of the ade during the year to Return relates.	which the	Class T.B. min	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Class T.B. minu	Group 1	Group 2	Group 3	T.B. plus)	Class T.B. minu	Group 1	Group 2	Total (Class	T.B. plus)	Class T.B. min	Group 1	Group 2 Group 3	Total (Class T.B. plus)	Class T.B. minu	Group 1	Group 2	Total (Class	T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Class T B. minu	Group 1	Group 2	Group 3  Total (Class	T B, plus)	Class 1.B. min	Group 1 ———————————————————————————————————	Group 3	Total (Class T.B. plus).	Class T.B. min	Group 1	Group 2	Group 3
	Adults M	23	13	1 .	•••	14	5	4	1	••••	5	2	3			3	7	1		1	2	3	••••		3	7			7	1	1	•••		1						••••	••••	
Disease arrested	F	8	7	1 .	•••	8	5	2	{		2	9	2		•	2	4	3		3	1	1		1	5	5 5			5	3	4	•••		4	•••		••••	••••				••••
	Children	4	1			1	1					1 .					2 .			••••		••••			. 2	2			•••	5								••••			••••	••••
	Adults M	18	17	10 .	•••	27	1	5	2	1	8	1	4	1	. \	5	2	3	1	4	1	5	1	(	3	4	1		5	1	11		1	1	5 1	9 2		21	8	32	5	
Disease not arrested	F	19	5	6 .		11	6	1	1	••••	2	4	4	2	.	6	4	4	1	5	3	8		8	5	2	5		7	4	13	2	1	.5	6 1	1 6		17	9	22	4	••••
<u> </u>	Children	1		1 .		1	••••					1 .																•••		•••	•••				1					1	••••	
Condition not ascertaine	ed during year				•••		••••		••••																		••••			•••		•••									•••	
Total on Dispensary Re	g. at 31st Dec	73	43	19 ( .	•••	62	18	12	4	1	17	18 1	13	3	. 1	6	19 1	1	2	13	7	17	1	. 18	18	18	6	•••	24	14	29	2	3	1	12 3	0 8		38	17	55	9	
Discharged as	Adults M	41	7   .			7	1			.									.									••••						.							••••	
recovered	F	29	1 .			1	1					1 .				.	••••			••••		••••					••••	••••	••••	••••					•••			••••			••••	
	Children	42					3				1	.2					1			••••								•••		••••	••••				•••		V	••••			••••	••••
Lost Sight of or others from Dispensary Regis	wise removed ster	172	86 5	52	1	38	52	37	7	1 4	15 5	0 2	.5	9	34	4	39 2	3	7	30	25	31	9	. 40	19	24	12		36	12	26	3	. 2	9   1	.3 2	4 4		28	1	6	2	
	Adults M	19	17 4	6	7	70	8	13	15	4 3	3	6 1	3 1	1 3	2'	7	6	6	9 1	16	9	5	14 1	20	4	3	15	1	19	9	8 1	3 2	2 2.	3	4	2 9	3	14	3	3	4	1
Dead	F	21	14 3	1	8	53	9	12	15 .	2	7	4	8 21	1	3(	0	3	8 9	2	19	6	6	5 4	15	9	9	7	1	17	6	2	5		7	3	3 5	1	9	1	1	6	1
	Children		••••				***	••••							<b></b>	A Caloning 24					1				1			•••	••••												••••	• • •
Total written off Disper	nsary Reg	324 12	25  12	9 1	5 20	69	74	62 (	38	5   10	5 7	3 4	6 41	1 4	91	1	49 3	7 25	3	65	41	42	28	75	33	36	34	2	72	27	36 2	1 2	2 5	9 2	20 2	9 18	4	51	5	10	12	2
Grand Totals	3	397 16	58 148	8 15	33	1 9	92   7	74 4	2	6 122	2 9	1 59	9 44	4	107		58 48	8 27	3	78	48	59	29 5	93	51	54	40	2	96	41*	65 2	3 2	90	) 3	2 59	9 26	4	89	22	65	21	2

\*One became T.B. Positive (1).

## (B) NON-PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary at the end of 1933, arranged according to the years in which the Patients first came under Public Medical Treatment, and their classification as shown on Form A.

		1	Previo	ous to	o 192	26			1926		T		19	27				1928				192	9			1	930				1931				1	1932				1933	3.
dition at the time of the le during the year to Return relates	which the	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	lotal	Bones and Joints	Abdominal Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	renphielal Gianus	Bones and Toints	Abdominal	Other Organs	Peripheral Glands	Total .	Bones and Joints	Abdominal Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs  Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands
	Adults M				••••	••••		••••				1	1		2	2			2			••••	•••					••••		••••		•••			.		\				
Disease arrested	F			••••		••••	••••									1	1		2	. 1				1	1		.)	1		••••		••••					\				
	Children	1				1	1		• • • •		1 .			1	1	1	1		2		1		2	3	3	4	. 4	11	3			2	5	2		1	3		<b>\ </b>		
	Adults M			1		1										1			1		Ţ			••••				••••		****								1			
Disease not arrested	F		2	<u> </u>	••••	3							1	1	2		1		1	. 1	·			1							1 .		1	1	1 .	1	3		Ţ		
	Children				1	1		1		1	2 .		2	. 4	6	4	••••		4	·	1		1	2		3		3	5	3	1	4	13	3	3	5	11	3	1		3
Condition not ascertain						•••																••••					•   ••••	••••		••••									-		
Total on Dispensary Reg			2		1	6	1	1		1	3	1	$\frac{}{3}$	6	11	9	3		12	2 2	2		3	7	4	7	. 4	15	8	3	2	$-\frac{1}{6}$	19	6	4 .		17	4	1		3
Transferred to Pulmon		1		1	1	3		l	1	1	1						1							100			.	1								)			.	·	1
	Adults M	2		2	1	5								. 1	1				1	L	.								••••						} .		<b></b>		<b></b>		
Discharged as recovered	F	3	2		2	7		1		1	2		1	. 1	2									•••		•••		***		••••											
	Children	18	17	3	27	65		4	2	.4 2	.0	2	5	. 8	15	2	4		9 15	5 1	1	1	13	16	1		. 1	2		••••							-				
Lost Sight of or othe from Dispensary I	rwise removed Register	34	12	11	24	81	12	5	2	7 2	6	5 1	0	. 12	27	7	3	2	9 2	1 3	1	1	6	11	4	5	5 9	23	5	1	1	5	12	3		2 2	2 7	2			1
1	Adults M	3	1	2		6	1				1 .				••••		••••	***						••••					1	••••			1	1			. 1				<b></b>
Dead	F	-		1				2			2	2			2						••••			••••				••••			••••								1	-	
	Children	1				1	1		1 .		2		3		3		1	••••		ı	. 1	1		2			1	1	1	1			2								
Γotal written off I Register	Dispensary	62	32	19	54	167	14	12	5 2	22 5	3	9 .1	9	. 22	50	9	8	2 1	9 3	3 4	3	3	19	29	5	5	5 10	26	7	2	1	5	15	4		2 2	2 8	2	1	••••	1
Grand Totals of (a) uding those transferred	and (b)	63	34	21	55	173	15	13	5 2	3 5	6	10 2	2 1	28	61	18	11	2 1	9 50	) (	5 5	3	22	36	9	12	6 14	41	15	5	3	11	34	10	4	2	9 25		2		

## SECTION IV. CONTAGIOUS DISEASES (ANIMALS) ACTS.

The total number of inspections made during the year under the above Acts was 38 and the following statement gives particulars of the action under the Acts and under the Orders made by the Minister of Agriculture and Fisheries.

No cases of suspected Foot and Mouth Disease were reported during the year; the cases which occurred at a Farm adjacent to the Borough boundary in December of 1932 were confined to that farm and no fresh cases having occurred, all restrictions as to movement of animals were removed from the Borough early in 1933.

Swine Fever Order 1908.—On the extension of the Borough boundary on the 1st October the supervision of the premises of two pig dealers at which outbreaks of swine fever had occurred was taken over from the County Authority, and a further case occurred on premises adjoining a licensed slaughterhouse. No fresh case occurring, all restrictions were removed and disinfection carried out at the three premises.

Parasitic Mange Orders 1911-1919. — No cases of Parasitic Mange were reported during the year.

Tuberculosis Order 1925.—One case of Tuberculosis was notified during the year.

Sheep Double Dipping Order 1920.—Three hundred and forty-three sheep and lambs were dipped within the Borough.

Rat and Mice Destruction Act, 1919.—Fifty-eight complaints were received and dealt with during the year. The usual crusade against rats was carried out during the official "Rat Week," and in addition to those destroyed by poison, some 802 rats are known to have been accounted for by other means of extermination, such as the use of dogs, ferrets, traps, etc. Four hundred and seventeen visits were made during the year in administering the Act.

Proceedings were instituted against a Pig Dealer for a breach of the Registration of Swine Act, 1922, by moving swine contrary to the Act, and for failing to deliver up the movement licence to the Local Authority. The defendant was fined £10 for moving the swine and £2 10s. 0d. for failing to deliver up the movement licence.

## PART IX.

## MISCELLANEOUS APPENDICES.

## Eirths Registered in the County Borough in 1933.

Ward.			Le	egitimate.	Illegitimate.	Total.
Chalkwell		•••	• • •	114	5	119
Westborough				175	10	185
Victoria		•••		52		52
Milton	• •••	•••	•••	85	4	89
Prittlewell		•••	•••	58	4	62
Pier		•••		62	3	65
Southchurch		•••	•••	217	9	226
Thorpe		• • •		80	3	83
Leigh		•••	•••	122	5	127
St. Clements	• •••	•••	•••	79		79
*Shoeburyness Are	a			33	_	33
*Eastwood Area		• • •	•••	17		17
	,	Totals	•••	1094	43	1137
					_	

\*For period 1st October to 31st December, 1933.

No. of Births of boys registered	577
No. of Births of girls registered	560 — 1137
Infants born in the Borough to non-residents:—	
Males 33, Females 42, Total 75.	

## Illegitimate Infants:--

	1	Males.	Females.	Total.
Born in Borough to residents		24	16	40
Born in Borough to non-residents	• • •	1	2	3

These figures compiled from the returns of the local Registrar of Births do not coincide with the figures supplied by the Registrar-General, viz.:----

			R	Registered	Inward Transfers.	Outward Transfers.
Legitimate Bi	rths—					
Males	•••	•••	•••	547	123	25
Females	• • •	•••	* * *	539	118	36
Illegitimate B	irths—					
Males	•••	•••	• • •	27	23	1
Females	•••	•••	• • •	19	15	2

Still Births.—The number of still births registered in the Borough was as follows:—

	Males.	Females.
Occurring in Borough	21	17
Inward Transfers	4	6
Outward Transfers	3	1
Allocated to Borough	22	22

All the above were legitimate.

Notification of Births Act, 1921.

There were received during the year, 1,126 notifications and eight duplicate notifications of births in the Borough, 38 being of still births. Four hundred and ninety-five notifications were made by doctors, 465 by midwives, and 84 by midwives but a doctor being also in attendance, and 44 by parents or other persons; in the latter cases a medical man was in attendance at the birth of all cases.

No notification was received in 35 cases, 27 of which were attended by doctors, and eight by midwives. Failure to comply with the requirements of the Act occurred in 3.01 per cent. of the births, as compared with 3.07 per cent. in 1932.

In each instance, a communication was sent to the person who had failed to notify, calling attention to the requirements of the Act, but as in most cases the omission was due to inadvertence or to ignorance of the law, no prosecution was instituted in any of the cases. Six cases were afterwards notified.

#### Maternity and Child Welfare Scheme.

Milk for Mothers and Children.—The following table shows the quantity of fresh and dried milk ordered each month of the year:—

					Fre		Dried	Mill	k.			
					Quant	ity.	С	ost.	Quantit	у.	Со	st.
					Pints.	£	s.	d.	lbs.	£	s.	d.
January	•••		• • •	•••	5057	73	14	$11\frac{1}{2}$	214	15	3	2
February	•••	•••	• • •	•••	4658	64	0	$1\frac{1}{2}$	208	14	14	8
March	•••	•••	•••	• • •	5347	55	7	$4\frac{1}{2}$	213	15	1	9
April	•••	•••	•••	•••	4018	41	17	1	135	9	11	3
May	•••	•••	•••	•••	3622	37	14	7	110	7	15	10
June '	•••	•••	•••	• • •	3165	32	19	$4\frac{1}{2}$	136	9	12	8
July	•••	•••	•••	•••	2952	30	15	0	96	6	16	0
August	•••	•••	•••	•••	2305	24	0	$2\frac{1}{2}$	121	8	11	5
September	•••	•••	•••	• • •	2756	32	15	11	72	5	2	0
October	•••	• • •	•••	•••	3605	52	11	$5\frac{1}{2}$	96	6	16	0
November		•••	•••	•••	4580	66	15	10	126	8	18	6
December	•••	•••	•••	•••	5046	73	11	9	126	8	18	6
Total for	1933	•••	•••	•••	47111	586	3	8	$165\overline{3}$	117	1	9
	1932	•••	•••	•••	28606	385	9	0	1725	122	3	9
	1931	•••	•••	•••	15385	205	4	$4\frac{1}{4}$	770	57	5	0
	1930	• • •		•••	7278	99	7	$7\frac{1}{2}$	566	42	10	6
	1929	•••	•••	•••	3301	46	6	6	394	29	11	q
	1928	•••	•••	•••	7249	101	10	1	261	19	13	0
	1927	•••	•••	•••	10255	139	10	$5\frac{1}{2}$	408	30	12	0
	1926	•••	•••	•••	10235	138		3	307	23	0	a
	1925	•••	•••	•••	16055	240		$2rac{1}{2}$	408	30		8
	1924+	•••	•••	•••	$29893\frac{1}{2}$	411		2	1331	99		6
	1923	•••	• • •	•••	21580	256	14	$9\frac{1}{2}$	567	47	0	6

†Since September 1st, 1924, Grade A Milk only has been supplied by the Corporation under the Maternity and Child Welfare Scheme.

Meals for Expectant Mothers and Young Children in Necessitous Cases. — Three necessitous mothers were provided with dinners and teas during 1933 at a cost of £5 12s. 6d.

Dental Treatment is provided for expectant mothers and young children at the School Dental Clinic by arrangement with the Education Committee, 93 attendances being made by 49 expectant mothers, the treatment afforded being 126 extractions, 34 fillings, 2 dressings and 1 scaling. Dentures are not provided, but necessitous mothers are assisted out of the Voluntary Fund to obtain them at reduced fees from private dental surgeons. The young children who received dental treatment at the School Clinic numbered 100, the total extractions numbering 194, fillings 55 and dressings 6.

Tonsils and Adenoids. — Forty-five children, under five, received operative treatment by arrangement with the Education Committee, 15 receiving free treatment, the remaining 30 contributing £21 18s. 0d. towards the cost.

Treatment of Squint.—Twenty-one young children attended at the Education Committee's Eye Clinic for refraction by the Specialist Opthalmic Surgeon, and appropriate spectacles were prescribed and obtained at the cost of the parents.

#### Deaths in Institutions in 1933.

Of the 1,139 deaths which were registered as having occurred in the Borough, 256 or 22.5 per cent. occurred in Public Institutions, 226 taking place in the Southend General Hospital, 23 in the Borough Sanatorium, and 7 in Nazareth House. The percentage shows a considerable increase as compared with previous years (10.7, 12.1 and 12.9 respectively in 1932, 1931 and 1930) and is due to the increase in hospital accommodation available as the result of the opening of the Southend General Hospital.

Of the 1,559 deaths of residents of the Borough, 699 or 44.8 per cent. took place in Public Institutions either in the Borough or elsewhere as under:—

## Public Institutions in the Borough:-

Southend General Hospital	• • •	•••	•••	• • •	146	
Borough Sanatorium		•••	***	•••	23	
Nazareth House			• • •	•••	7 —	- 176

#### Public Institutions outside the Borough:—

Southend Municipal Hospit	al	•••		• • •	469	
Rochford Institution	•••	•••	• • •	• • •	2	
Severalls Mental Hospital	•••		•••	• • •	6	
Other Mental Hospitals	• • •	•••	• • •	• • •	9	
London Hospitals	•••	• • •	• • •	• • •	31	
Other Hospitals	•••	•••	•••	•••	6 —	523

The percentage, 44.8, shows a marked increase as compared with previous years, the figures for the years 1932 to 1929 being 39.6, 37.7, 35.9 and 32.6 respectively, and merely reflects the increasing tendency of persons suffering from serious disease to enter hospitals at which alone adequate treatment is available for many ailments.

The number of deaths in Nursing Homes in the Borough was 57 of which 12 were of persons not resident in the area.

#### Inquests.

Inquests were held by the Coroner for the Borough as to deaths of 71 persons who died during the year, a percentage of 6.2 of the 1,139 deaths as compared with a percentage of 6.3 for the Country generally.

Suicides:—									
Coal Gas I	Poisonir	ng	•••	•••	• • •	•••		14	
Lysol Poise	oning	•••	•••	• • •	• • •	•••	•••	3	
Potassium	Perman	nganat	te Po	isoning	g	•••	•••	1	
Oxalic Aci	d Poiso	oning	•••	•••	•••	•••		1	
Corrosive	Acid P	oisoni	ng	• • •	• • •	• • •	•••	1	
Cut Throa	t		•••	• • •	•••	•••	• • •	1	
Drowning	•••	• • •	•••	• • •	• • •		•••	3	
Under trai	n	•••	•••	•••	•••	•••		4	 <b>2</b> 8
Murder:—									
By Coal G	as Pois	soning	•••	•••	•••	•••	•••	1	 1
Accidents:—									
Burns	•••	•••		•••	•••	•••	•••	3	
Suffocation		• • •	• • •	•••	• • •	•••	•••	1	
Coal Gas 1	Poisoni	ng	•••	• • •	•••	•••		1	
Motor Vel	nicles	•••		•••	•••	•••	•••	16	
Falls	•••	•••		•••	• • •	•••	* * *	3	
Sewer Gas	s Poiso	ning	• • •	•••	• • •	• • •	• • •	2	
Under Ana	aesthetic	cs		•••	• • •	•••	•••	2	
Drowning			•••	•••	• • •	• • •	• • •	2	 30

#### Open Verdicts:—

Under train	•••		• • •	•••	• • •	1	
Coal Gas Poisoning	• • •		•••	• • •		1	
Drowning	•••	•••	•••	•••	• • •	4 —	6
Natural Causes	• • •	* * *	• • •	• • •	•••	6 —	6
							71

Deaths Certified by Coroner.—In 32 cases (or 2.8 per cent.) in which the cause of death was not certified by a medical practitioner, the deaths were registered on the Coroner's Certificates after Post-mortem examinations but without inquests being held, pursuant to the Coroner's (Amendment) Act, 1926.

Uncertified Deaths.—Of the 1,139 deaths in the Borough, 36 were uncertified either by medical practitioners or by the Coroner with or without inquest, a percentage of 3.1 as compared with 3.8 in 1932.

The causes to which the deaths were attributed were as follows:—

	No. o Deaths	
Heart Failure	18	53, 64, 66, 67, 68, 73, 73, 74, 75, 77, 78, 79, 80, 82, 83, 84, 85, 89.
Angina Pectoris	2	65, 72.
High blood pressure		
and heart failure	1	55.
Valvular Heart Disease	3	65, 69, <b>74</b> .
Coronary Thrombosis	1	63.
Cerebral Haemorrhage	3	62, 68, 69.
Multiple Cancer	1	67.
Myocardial Degeneration	n 4	74, 74, 74, 78.
Broncho-Pneumonia and		
senility	1	95.
Chronic Bronchitis	1	58.
Premature Birth	1	1 hour:
	36	

## Southend Municipal Hospital.

Maternity Wards.

Number of cases admitted during 1936. From the County Borough 236. From	
	23 days.
Number of cases delivered by:—	
	270
(b) Doctors	45
Number of cases in which medical assis	stance was sought by a midwife 21
Number of cases notified as:—	
(a) Puerperal Fever	Three.
(b) Puerperal Pyrexia	Fourteen.
Number of cases of Pemphigus Neona	torum one.
Number of Infants not entirely breast	fed while in Hospital 10
Number of cases notified as Ophthali	nia Neonatorum Nil.
Number and cause of Maternal Death	s 6
Puerperal Septicaemia following P.P.	H 2 (1 Borough, 1 County)
Puerperal Septicaemia following Crani	oťomy 1 (Borough)
Cerebral Embolism	1 (Borough)
P.P.H. Retained Placenta	1 (Borough)
Eclampsia	1 (County)
1	`
Cause of Foetal Deaths:—	
(a) Stillborn :—	
Macerated	3 Breech Presentation 4
Placental Infarction	1 Anencephalous 1
Craniotomy	B Failed Forceps 1
Eclampsia in mother	1 Obstructed labour — forceps 1
Placenta Praevia	2 Cause not apparent 1
(b) Within 10 days of birth:—	
Prematurity	4 Haematemesis 14
Intra-cranial Haemorrhage	1 Congenital Malformation of
Atelectasis (Post-mortem)	
Patent Ductus Arteriolus (Post-mortem)	Anencephalous 1

## Other In-patients.

Classification of in-patients who were discharged from or who died in the Institution during 1933.

Disease Groups  ous Disease	Children		Me	7
ous Disease	(under 16 years of age)	ren : 16 f age)	Women Women	and len
ous Disease	Discharged	Died	Discharged	Died
	14	•	23	•
,	4	•	50	_
Tuberculosis—Pulmonary	ಣ	•	37	30
Non-Pulmonary	5	4	∞	4
Malignant Disease	:	•	61	75
(1) Acute Rheumatism (Rheumatic fever) together				
with sub-acute rheumatism and	00	•	22	7
(2) Non-articular manifestations of so-called "theumatism" (muscular rheumatism, fibro-				
	4	•	15	:
(3) Chronic Arthritis	:	:	29	•
Venereal Disease	•	•	9	:
Puerperal Pyrexia	•	•		•
Puerperal Fever				
(a) Women confined in the Hospital	•	:	• • • • • • • • • • • • • • • • • • • •	N =
(b) Admitted from outside	:	•	77	<b>⊣</b>
egnancy and child bearing		•	83	က
:				
a) Senile Dementia		•	27	16
(b Other	_	•	221	18
Senile Decay	:	•	17	87
Accidental Injury and Violence	71	-	250	21
In respect of cases not included above :—	00	•	113	70
Disease of the Nervous System and Sense Organs	78	4	173	04
Disease of the Respiratory System	148	9	239	114
Disease of the Circulatory System		4	76	95
:	61	67	350	27
Disease of the Genito-urinary System	28	67	961	30
:	17	7	39	1
	154	13	284	21

Ministry of Health Tables.

## TABLE I.

Vital Statistics of Whole District during 1933 and previous years.

District	ages.	Rates.	11.07 11.6 11.7 11.3 11.3 11.0 12.7 12.6 12.6
Net Deaths belonging to the District	At all ages.	Number.	1031 1118 1152 1198 1224 1224 1466 1217 1473 1524
eaths belong	Under 1 year	Rate per 1,000 Net Births.	4 5 4 5 4 4 4 5 5 4 5 5 4 4 4 5 5 5 4 4 5
Net D	Under	Number.	71 75 75 84 62 67 90 66 73
Fransferable Deaths.	-	Of residents not regis tered in the district.	179 221 243 277 298 327 418 376 483 555
Transi Dea		Of Non-residents regis tered in the district.	80 76 89 94 62 69 86 82 94 124
Deaths regis- 1 the District.		Rates.	10.0 10.0 10.2 10.2 9.7 9.9 8.7 9.1
Total Dea tered in th		Number.	932 973 998 1015 988 965 1134 1084 1052
		Rates.	15.9 14.9 15.6 14.9 12.8 12.1 12.9 11.2
BIRTHS.		ултрет Ё	1482 1435 1529 1564 1379 1505 1391 1374 1358
		Uncorrected Mumber.	1448 1381 1483 1508 1301 1415 1304 1335 1159 1159
əlbbi	to mi	Population estimated of each year.	93090 96450 98060 104300 107900 111200 114600 118400 120400 132374
			1923 1924 1925 1926 1927 1929 1930 1931 1933

The figures for the estimated population are those supplied by the Registrar-General, who gives 124,820 as the population on which the death and birth rates for 1933 should be calculated in view of the fact that the extension of the Borough Boundary did not take place until October 1st. n and after "

7,083 10,333

Prior to October 1st

Area of District in acres | land and inland water

Total Population at all ages, at Census 1931—120,093.

TABLE II. Cases of Infectious Disease Notified during the Year 1933.

	Total Cases Removed to Hospital.	: :	77	:	4	: :	4		*	: 60 : 60	3 :	: :	•	•
As from 1st Oct. 1933,	Eastwood Area	::	: : 07	:	:		: : :	:	:	•		: :	:	:
As fro	Shoeburyness Area		1 15	:			: :-		:	: -		: :	:	:
	St. Clements.		5 4 61	:	က		:-:		:	17		: :	:	
each Ward.	Leigh.	: :	22	:	67		: : : : : : : : : : : : : : : : : : : :	:	:	13	:-	٦ :		
in eac	Thorpe.	: :	1 3 78	:	: :		:		:	0	•	: :	:	:
_	Southchurch.	: :	11 9 102	:			: : : : : : : : : : : : : : : : : : : :	:	:	62		<b>-</b> ::	:	:
notii	Prittlewell.	: :	11 4 55	:			: es –	:	:	5	:	: :	:	:
cases	Pier.		7 2 14	:	: :		: : 01	:	:	0.4	:	: :	:	:
Total cases notified	Victoria.		13 15	:	: :	:		:	:	=======================================	•	: :		:
Ĭ	Milton.	: :	<u>ი</u> _ ი	:	: :	:	: : -	:	:	18	:	: :		:
	Westborough.		17 8 53	:	: ;		- m	61	-	1 25	:	: :	:	:
	Chalkwell.		132	:	: :	:	: : -	•	i	14.	:	1 1	:	:
	sbrewqu & 29		63	:	: :	i		:		28	i			:
	45 to 65.	: :	53:	: '	<b>-</b>	:		i	:	: %	:	: :		
	35 to 45.	! !	ကကတ	. '	<b>-</b>	:	67.70	:	:	15	-	1	;	:
	20 to 35.		7 7 36	: '	<b>-</b>	:	11	:		31	-	· :	:	:
ed.	12 to 20.	• •	22 22	:	: :	:		:	:	10			:	:
cases notified.	10 to 15.	::	13	:	: :	: :			1	က	:		i	
ases 1	.01 of 2		40	-	<b>-</b>			1	:	16	:		:	
jo	4 to 5.	! !	5 27	-	<b>-</b> :			:	:	: ന	: :	:	:	:
No.	3 to 4.	: :	4	:	: :	:		-	:	:07	: :	:	:	
	2 to 3.	:::	14	:	: :	: :		:	:	: 4	: :	:		:
	I to 2.	<b>:</b> :	c) :4	:	: :	: :	: :	:	:	: 9				:
	Under 1 year.	: :	<u> </u>	:	: :	:::	: :		:	15	: :		:	:
	At all ages.		77 38 466	: u	G :	: :	9 16	83	-	15	:01	:		:
	Notifiable Disease	Smallpox Cholera, Plague Diphtheria (includ- ing Membranous	Croup) Erysipelas Scarlet Fever	Enteric Fevers :	Paratyphoid	Relapsing Fever Continued Fever	Puerperal Fever Puerperal Pyrexia	Meningitis	Poliomyelitis Ophthalmia	Neonatorum	Trench Fever Malaria	ry alifis	Lethargica	Encephalitis

## TABLE III.

Causes of and Ages at Death during the year 1933.

			Net	Dea	ths a	t the	subjoi	ned ag	es of '	'Resid	ents''	
			whe	ther	occur	ring v	vithin	or wit	thout	the dis	strict.	
CAUSES OF DEATH.	All	0–1	1-2	2-5	5-15	15–25	25–35	35-45	45-55	55-65	65-75	75 and upwards
T-4												
Enteric Fever Smallpox						••••		••••				••••
Measles		• • • •				****		••••	••••	****	• • • •	••••
Scarlet Fever Whooping Cough	$\begin{bmatrix} 2 \\ 4 \end{bmatrix}$	 1	$egin{array}{c} 1 \\ 2 \end{array}$			••••	••••	••••		••••	••••	••••
Diphtheria	6				6							••••
Influenza	60	••••			1	2	5	8	10	6	12	16
Encephalitis Lethar- gica	1										1	
Cerebro-spinal Fever		••••	••••		••••	••••	••••	••••		••••		••••
Tuberculosis of						1.4	00	1.4	1.4	10		
respiratory system Other Tuberculous	79	••••	••••	••••		14	20	14	14	12	$oxed{2}$	3
Diseases	8	2	••••	1	1	1	3	••••	••••	••••		
Syphilis	4	••••	••••	••••		••••	••••	••••	••••	2	2	••••
General paralysis of the insane, tabes												
dorsalis	6	••••	• • • •				••••	2	1	3		
Cancer, malignant disease	219					1	1	10	35	52	79	47
Diabetes	$\frac{219}{25}$	••••		••••	1			10	4	$\begin{bmatrix} 32 \\ 7 \end{bmatrix}$	$\begin{bmatrix} 73 \\ 8 \end{bmatrix}$	47 4
Cerebral Haemor-	0.4											
rhage, etc Heart Disease	$\begin{array}{c c} 95 \\ 401 \end{array}$	••••	••••	••••	• • • •	 1	 4	$egin{array}{c} 3 \\ 12 \end{array}$	$\begin{vmatrix} 3\\20 \end{vmatrix}$	$\begin{array}{ c c c }\hline 22 \\ 62 \end{array}$	$\begin{bmatrix} 34\\117 \end{bmatrix}$	$\begin{array}{c} 33 \\ 185 \end{array}$
Aneurysm	4	••••	••••		••••		ì			1	1	100
Other circulatory dis-	F.C.									0		0.7
eases Bronchitis	56 68	• • • •		****			• • • •	2	$egin{array}{c} 4 \ 3 \end{array}$	8 6	$\begin{bmatrix} 17 \\ 15 \end{bmatrix}$	$\frac{27}{42}$
Pneumonia (all forms)	63	4	2	••••	2	2	1	11	8	8	11	14
Other respiratory diseases	20			1	1				3 -	4	4	7
Peptic Ulcer	13	••••	••••					3	3	5	$\begin{bmatrix} 4 \\ 2 \end{bmatrix}$	
Diarrhœa, etc	8	5			••••	••••		1			1	1
Appendicitis Cirrhosis of Liver	18 14	••••	••••	1	1	1	3	3	5 7	$\frac{3}{3}$	$\begin{array}{c c} 1 \\ 3 \end{array}$	 1
Other diseases of Liver	14	••••	••••	****	••••	••••	****	****		J	0	1
etc	7	••••			••••	••••	••••		••••	2	2	3
Other digestive diseases	26	4		1		2	2	1	2	$\begin{bmatrix} 2 \end{bmatrix}$	7	3
Acute and chronic		_						_				
Nephritis	$\begin{bmatrix} 52 \\ 2 \end{bmatrix}$	• • • •	••••	••••	••••	1	1	2	6	12	16	16
Puerperal Sepsis Other puerperal cau-		••••	****	••••	••••	••••	****	4	****	••••	••••	••••
ses	5	••••	••••		••••	• • • •	3	2			••••	
Congenital debility, premature birth,												
malformation, etc,	41	38	••••		2		• • • •		1	* * * *	>	
Senility Suicide	$\begin{array}{c c} 38 \\ 23 \end{array}$	••••			••••		••••	8			$\begin{bmatrix} 2 \\ 3 \end{bmatrix}$	36
Suicide Other violence	$\frac{23}{42}$	 2	••••	1	4	$egin{array}{c} 1 \\ 4 \end{array}$	3	4	4	$egin{array}{c c} 6 \\ 4 \end{array}$	4	$1 \\ 12$
Other defined diseases	137	1	2	ī	$\overline{4}$	$\bar{6}$	7	4	21	$2\overline{6}$	37	28
Causes ill-defined or unknown	12								1	1	4	6
unknown	12	••••	••••	••••	••••	••••	****	••••	1	1	*	U
Totals	1559	<b>57</b>	7	8	25	36	 54	91	 159		379	486
TOTALS	1009	31		0	20	30	94	31	109	201	319	400

TABLE IV.

Net Deaths from Stated Causes at various ages under One Year of age

			dan brown core						7/11/2 May 12 19 19 19 19 19 19 19 19 19 19 19 19 19		
CAUSES OF DEATH.		Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 Weeks	4 Weeks and under 3 months	3-6 months	6-9 months	9-12 months	Total Deaths under 1 year
All causes Certified Uncertified	••••	22	6	2	2	32	3	11	5	3	54 1
Small-pox					• • • •			••••			
Chicken-pox											
Mondos									****	****	••••
Carrer Manalan	••••		••••		****	****		••••	• • • • •	****	••••
Carried Forces			••••	••••	••••	••••	• • • •	••••	••••	****	••••
	• • • •		****	****		• • • •		****	••••	7	
Whooping Cough	• • • •		• • • •	••••	• • • •	****		••••		1	1
Diphtheria and Croup	• • • •			• • • • •				• • • •		• • • •	
Influenza								• • • •			****
Erysipelas								••••			
Meningococcal Meningitis											
Meningitis											
Tuberculous Meningitis								1		1	2
Abdominal Tuberculosis											ļ
Other Tuberculous Diseas											
Campulaiana			3		,			****	****	* * * *	
	• • • •	••••	••••		• • • •	••••		****	• • • •	****	****
Laryngitis	••••	••••	••••		••••	••••		••••		****	• • • •
Bronchitis	• • • •	••••	••••			••••	• • • •			****	••••
Pneumonia (all forms)	• • • •	****			• • • • •			3	1		4
Diarrhœa and Enteritis	• • • •		1			1	• • • • •	3		1	5
Gastritis											****
Syphilis											
Injury at Birth		5	1	1		7					7
Suffocation, Accidental								1			1
Inattention at Birth	• • • •	1		****		1					ī
Atelectasis		$\frac{1}{2}$			1	3					3
Congenital Malformation		5	1	1		7	ï	1	1	****	10
70:41	••••	9	$\frac{1}{2}$	i	1	12	$\frac{1}{2}$			••••	14
	• • • •	9	2	****	1	14	2	••••	••••		14
Atrophy, Debility and											
Marasmus	• • • •				****	••••		••••		••••	••••
Icterus Neonatorum	••••				••••					••••	
Other causes	••••	1	1		• • • •	2		2	3	••••	7
		-									
Torus		6.9	C	2	0	20	0	11	-	0	==
Totals	••••	23	6	2	2	33	3	11	5	3	55
								1			
Not Rinths in the Veer		Logi	timat	A							1 266
Net Births in the Year		Legi			•••	• • •	• • •	• • •	• •	•	1,266
		Illegi	timat	te							81
Net Deaths in the Year		Legi	timat	е .		• • •					46
2101 23000000000000000000000000000000000		_						• •			
		Illegi	uma	te	• • •	• • •		• •			9

## Meteorological Tables.

MAXIMUM THERMOMETER, 1933. (Shade).

Mon	th		Mean Deg.	Highest Deg.	Date	Lowest Deg.	Date
January	••••	••••	41.2	52	lst	32	24th
February	••••	••••	45.3	54	5th	36	24th
March	****	••••	52.6	63	29th	42	lst
April	••••		56 7	69	8th	44	19th
May	••••		61 6	72	22nd, 23rd	54	20th
June	••••		69 5	79	5th, 6th	58	18th
July	••••	••••	73 8	88	27th	63	12th
August	••••		76.5	88	29th	68	11th
September	••••		68.3	77	17th	59	13th
October	••••	••••	58.5	67	9th, 10th	44	27th
November	••••		47.3	56	20th	<b>3</b> 9	26th
December	••••		37.8	41	7th, 22nd	34	4th, 9th

## MINIMUM THERMOMETER, 1933.

Mon	th		Mean Deg.	Highest Deg.	Date.	Lowest Deg.	Date.
January	••••		33 9	47	3rd	26	13th, 26th
February	••••	••••	35.1	46	5th, 6th	26	20th
March	••••		39.3	46	17th	34	13th, 21st,
April	••••		42.1	50	10th	35	27th. 19th
May	••••	••••	48.7	54	5th, 23rd,	45	lst
June	••••	••••	53.1	59	28th 4th	46	12th, 18th
July	••••	••••	58.4	66	27th	52	17th
August	••••		58.7	66	4th	49	22nd
September	••••		55.2	63	5th	45	14th
October	••••	••••	48.0	61	11th	33	28th
November	••••	••••	39.4	48	20th	34	16th
December			32.3	37	3rd	25	15th

RAINFALL 1933.

Mon	th.		Total Rainfall Inches	Quarterly Rainfall	Highest Rainfall in 24 hours Inches.	Date
January	••••	***	1.32	)	0.32	7th
February	••••		0.80	3.14	0.27	21st
March	••••	• • • • • • • • • • • • • • • • • • • •	1.02		0.26	17th
April			0.57		0.24	25th
May			1.40	4.01	0.38	6th
June	••••	••••	2.04	)	0.63	26th
July	••••	••••	2.40	)	0.67	20th
August	••••	••••	0.49	5.58	0.24	22nd
September		••••	2.69	)	0.51	12th
October			1.11	)	0.24	7th
November			1.14	2.91	0.25	13th
December		••••	0.66		0.28	26th

WIND, 1933.

N N N	:	ಣ	_	:	61		67	•	-	63	-	:	
N.W	:	23	:	ಣ		:	•	ಣ		4	4	22	
M N M		2	:	82	63	7		<b>-</b>	<u></u>		ಣ	:	
W.	2	i	_	23	į	į	_	_	1	1	7	က	
WSW	2	23	ಣ	7	:	67	©1	4	:	-	-	2	
S.W.	9	9	6	ũ	2	ũ	10	9	ನಾ	9	Н	23	
S.S.W.	-	:	က		-	-	67	-	_	23	23		
Ś	2	:			:	23		į			:	:	
S.S.E.		23	_	67	:	-	7	67		i		:	
S.E.	2	က	į	Т	7	7	87	67	20	-	ော	ಣ	
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म्	П	:	:	2	က	į	-	23	က	23	į	-	
E.N.E	23	67	4	_	67	9	က	23		-	_	က	
N.E.	5	ಣ	4	4	2	က	-	67	11	9	į	00	
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ż	23	4	:	*	÷	_	:	:	23	1	00	4	
	i	:	:	•	:		i	:	:	į	:		
Month.	January	February	March	April	May	June	July	August	September	October	November	December	

TABLE SHOWING NUMBER OF HOURS OF SUNSHINE IN EACH MONTH DURING THE LAST TEN YEARS.

1933	35.2	91.6	186.7	153 3	186 7	250.0	236.8	260.9	176.2	89 05	41.9	35.0	1743 35
1932	52.9	79.1	144.7	148.3	143.4	223.8	161.3	216.1	108.1	98.6	47.1	51.8	1475.2
1931	58.0	67.1	164.2	122.3	192.3	221.6	182.0	165.2	140.1	122.9	61.0	36.8	1533.5
1930	44.42	69.54	136.18	124.54	188.12	256.6	194.48	239.36	133.12	143.0	75.30	37.0	1643.12
1929	39.24	69.12	168.48	172.18	267.18	216.12	260.48	208.18	216.0	132.42	63.42	59.54	1874.36
1928	61.30	105.0	111.42	152.24	214.30	237.12	312.6	215.30	239.48	120.36	56.0	55.48	1883.6
1927	59.24	53.30	136.36	189.6	270.0	191.42	156.6	199.24	124.0	106.24	56.45	37.18	1580.12
1926	46.12	58.24	131.12	125.30	183.0	194.54	213.6	229.30	150.12	110.12	43.6	65.48	1551.6
1925	52.18	74.36	120.36	155.48	243.48	270.30	199.6	165.6	136.30	111.48	77.24	65.30	1673.0
1924	63.48	55.12	179.18	161.48	234.0	211.24	257.36	201.18	123.24	93.0	55.0	43.30	1679.18
	:	:	:	:	•		:	:	9 9	9 9	:	:	:
ч		* • •	:	:	:	*	:	į	:	:	;	* * *	
Month	January	February	March	April	May	June	July	August	September	October	November	December	Totals

## TOTAL RAINFALL IN PAST YEARS.

0										
1894	•••	•••	•••	•	inches.	Rain	fell	on	193	days.
1895	•••	•••	•••	19.38	,,	,,	,,	,,	145	23
1896	• • •	•••	•••	21.74	,,	,,	,,	2,5	141	,,
1897	•••	•••	•••	21.23	,,	,,	,,	,,	125	,,
1898	•••	•••	• • •	15.76	,,	,,	,,	,,	99	,,
1899	•••	•••	•••	22.38	,,	**	,,	,,	128	,,
1900	•••	•••	• • •	20.5-	,,	,,	,,	<u>,</u>	143	,,
1901	•••	•••	•••	14.83	,,	,,	,,	,,	107	,,
1902	•••	•••	• • •	18.51	,,	,,	,,	,,	134	,,
1903	• • •	•••	• • •	31.66	,,	,,	,,	,,	171	,,
1904	•••	•••	•••	18.76	,,	,,	,,	,,	130	,,
1905	•••	•••	•••	17.89	,,	,,	,,	,,	150	,,
1906	• • •	•••	•••	23.21	,,	,,	,,	,,	149	,,
1907	• • •	• • •	•••	19.98	,,	,,	,,	,,	173	,,
1908	•••	• • •	•••	18.68	,,	,,	,,	,,	130	,,
1909	• • •	•••		25.77	,,	,,	,,	,,	154	,,
1910	• • •	•••	• • •	22.51	,,	,,	,,	,,	174	,,
1911	• • •	•••	•••	19.08	,,	9.9	13	,,	140	,,
1912	• • •	• • •	•••	20.23	,,	,,	,,	,,	176	,,
1913	•••	• • •	•••	18.93	,,	,,	,,	,,	145	,,
1914	• • •	• • •	•••	18.73	,,	,,	1,	,,	136	,,
1915	•••		• • •	24.55	,,	,,	,,	,,	140	,,
1916	• • •	•••	•••	17.65	,,	,,	,,	,,	155	,,
1917	• • •	• • •	•••	22.04	,,	,,	,,	,,	154	,,
1918 •	• • •	•••	•••	21.83	,,	25	,,	,,	183	,,
1919	• • •	• • •	•••	20.92	,,	,,	,,	,,	162	,,
1920	• • •	•••	•••	18.83	,,	,,	,,	,,	160	,,
1921	•••	•••		16.84	,,	,,	,,	,,	109	,,
1922	• • •	•••	•••	19.10	,,	,,	,,	,,	163	,,
1923	•••	•••	• • •	20.70	,,	"	,,	,,	196	9.
1924	• • •	•••	•••	25.07	,,	,,	,,	,,	194	,,
1925	•••	•••	•••	21.33	,,	,,	,,	,,	178	,,
1926	•••	•••	•••	22.36	,,	,,	,,	,,	151	,,
1927	• • •	•••	• • •	<b>22.7</b> 3	,,	,,	,,	,,	189	,,
1928	• • •	•••	• • •	23.5	,,	,,	,,	,,	191	,,
1929	•••	•••	•••	16.05	,,	,,	,,	,,	145	,,
1930	• • •	•••	•••	21.49	,,	,,	,,	,,	182	,,
1931	•••		•••	19.32	,,	,,	,,	,,	176	17
1932	• • •		• • •	17.83	,,	,,	,,	11	172	,,
1933	•••	•••		15.64	,,	,,	,,	,,	153	* * *
700					,,			,,		

## ANNUAL REPORT

OF THE

## MEDICAL SUPERINTENDENT

OF

# SOUTHEND MUNICIPAL HOSPITAL, ROCHFORD

For the Year 1933.

STAFF—	
Medical—	
Resident—	
Medical Superintendent, L.R.C.P.	SAMUEL CIEMAN, M.R.C.S.,
Senior Assistant Medical M.B., Ch.B., F.R.C.S.	Officer, Frank N. Foster, (Eng.).
Assistant Medical Officers:	
Henry Canwarden, M.	R.C.S., L.R.C.P.
H. L. Whitchurch D.P.H., (London)	BEACH, M.R.C.S., L.R.C.P.
Non-Resident—	
Consulting Surgeon, R. H.	CAMPBELL, F.R.C.S. (Eng.).
Consulting Physician, RAL M.R.C.S., L.R.C.P. (re	еsigned).
Ophthalmic Surgeon, Danies B.Ch., F.R.C.S. (Eng.	L D. EVANS, M.C., M.A., M.B.,
Tuberculosis Officer, G. N.	MEACHEN, M.D., M.R.C.P.
Nursing—	
Resident 117	Non-Resident 35
Matron, Miss	
Administrative Sisters 5	Nurses and Probationers 94
Departmental Sister	Male Mental Charge Nurses 2
(Theatre) 1	Male Nurses 4
Ward Sisters 14 Night Sisters 2	Female Mental Charge Nurses 5
Massage Sister 1	Male Mental Nurses 7
Masseuse 1	Female Mental Nurses 15
	150
	$\begin{array}{c} 152 \\ \end{array}$
Other Staff—Non-resident—	
Chaplains	FATHER V. HEMMING,
Dianonasa and Dadiographs	REV. A. JONES. er Miss M. L. Wright.
Dispenser and Radiographe	M A C D
Assistant Dispenser	MR. A. C. KICKS.

The hospital sustained a grievous loss in the untimely death of its esteemed and beloved Medical Superintendent, the late Dr. Frank Newey, O.B.E., on Whit Monday, June 5th, 1933. A memorial service, conducted by Canon Gowing, was held in the Institution Chapel. His example and personality continue to pervade the hospital, which is inspired in its work by the tradition created and established by him.

After acting in the capacity of Medical Superintendent from 6th June, 1933, the Senior Assistant Medical Officer was appointed to this post as from 19th September, 1933, and the vacancy so created was filled in November.

It is with regret that I have to record the resignation of Dr. Ralph Norman from the Consultant Staff after having acted as Consulting Physician to the Hospital for eight years. His resignation is effective as from 31st December. His successor has as yet not been appointed, but in the interim authority has been granted to obtain the services of a Consulting Physician whenever it is deemed necessary.

The male nursing personnel of the hospital has been put on a proper basis, and has been augmented. The two officers who had previously been doing the work of male nurses were designated Grade II nurses, and two designated posts of Grade 1 nurses were created and filled. One nurse of each grade is allotted for day and night duty. There has since been an obvious improvement in the treatment and technique of genito-urinary cases, and the Matron and her night staff have been spared a great deal of unpleasantness and anxiety in the handling of refractory male patients.

The satisfactory administration of the Maternity Section of the hospital has been materially assisted by adding to its personnel two staff midwives, and so ensuring the constant attendance of a certified midwife in the Maternity Wards both by day and by night. Two of the hospital staff nurses who held their C.M.B. certificates were promoted to perform the duties of staff midwives and the vacancies so created duly filled.

Authority was obtained to furnish and equip the late Medical Superintendent's house for the accommodation of the Assistant Medical Officers who had been boarded out outside the hospital precincts. With the arrival for duty in November of the newly-appointed Senior Assistant Medical Officer, all the Medical Officers

took up their quarters in the well-appointed house. After due consideration, and for the benefit of all concerned, sanction was obtained for the conversion of and furnishing of one of the rooms adjoining the kitchen in the Nurses' Home into a Medical Officers' dining room. This has proved to be a mutually satisfactory arrangement.

#### ACCOMMODATION.

The total number of beds in the hospital remains unchanged. The complement of beds for sick, maternity and mental cases on 31st December, 1933, excluding seven cots in the maternity ward was 522, allocated as follows:— for men 163, for women 279, for children under 16, 80.

The following table shows the classification of beds provided and occupied on 31st December, 1933:—

	)	1		1	
	Wards	Provided	Occupied	Children	under 16
	walds	Trovided	occupied	Provided	Occupied
Male —Medical	)	40	30		
—Surgical		50	35		
Chronic		30	15	_	
Sick					
	> 10				
Female—Medical		57	45		_
—Surgical		46	40		_
—Chronic		72	67		_
Sick					
Children (under 16)	$^{2}$		_	80	80
Maternity—Beds	2	24	24	<u> </u>	_
Tuberculosis—					
Male	$\bigcap$ 2	12	12	<u> </u>	_
Female	}	10	10		_
Isolation	lή	4	4	_	_
Mental —Male		25	24		_
—Female		61	56		_
	3				
Mental Defectives					
—Male		6	6	_	_
—Female	J	5	5	_	_
	19	442	373	80	80
Tota	l Beds	522	453		

#### NURSES' TRAINING SCHOOL.

In December, 1926, the hospital was approved by the General Nursing Council as a complete training school for nurses. After a three-months trial period, probationer nurses enter upon a three-years course of training, on the completion of which they are required to sit for the final State Examination for admission to the general part of the State Register of Nurses. Application has not been made to the Central Midwives' Board for the recognition of this hospital as an approved training school for midwives. The results of the State Examinations in 1933 were as follows:—

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Preliminary—20 entered, 13 passed.

— 5 re-entered, 1 passed.

Finals — 3 entered, 1 passed.

—10 re-entered, 4 passed.
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Eight nurses received their Training School Certificate on completion of training.

Cups are awarded annually to the probationer who in her year receives the highest marks at the school examination. The annual school examination was held in May, 1933.

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3rd Year Examinations—9 entered, 8 passed.
(Cup, presented by Matron Wood, won by Nurse Andrew.)
2nd Year Examination—17 entered, 14 passed.
(Cup, presented by Mrs. Councillor Leyland, won by Nurse Pipkin.)
1st Year Examination—22 entered, 18 passed.
(Cup, presented by late Matron Jones won by Nurse Kirkham.)
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In view of the unduly large proportion of unsuccessful candidates at the State Examinations, the Medical Superintendent and the Matron were instructed to submit a report on the training of nurses at the hospital and suggestions for its improvement. The report was placed in the hands of a Sub-Committee for its consideration.

#### WORK OF THE HOSPITAL.

This is outlined in the form of statistical tables and analyses which classify in detail the work of the hospital during the year. The hospital's complement of beds remains unchanged, and comprises 529, including 7 cradles.

The total number of admissions (including infants born in hospital) is 4,001, an increase of 23 over the 1932 figure, although the number of infants born in hospital represents a decrease, 315 as against 331 in 1932. This represents an average weekly admission rate of 77, or a daily admission rate of 11. The total number of patients treated to a conclusion (including infants born in hospital) is 4,059, compared with 3,949 in 1932.

The total number of deaths is 658; the number for 1932 was 611.

The duration of stay of all patients:—

		1933.	1932.
(a)	Four weeks or less	2,738	 2,599
(b)	Four weeks and under thirteen weeks	976	 1,003
(c)	Thirteen weeks or more	345	 347

It will be noticed from the above table that a larger number of patients were treated for the shorter period in 1933 than in the preceding year, and that this replaces the smaller number treated for a longer period. This may be accounted for to some extent by a slight increase in the proportion of acute cases admitted to hospital, by increasing attention being directed towards the provision of prompt and efficient treatment and by the dispatch, with the least possible delay, of patients who have made a good recovery. This is also confirmed by the fact that, although there is an increase in the total number of admissions and discharges, the average number of beds occupied during the year is considerably diminished, being 494.3, compared with 529.7 in 1932. The average daily percentage of available beds occupied in 1933 is 93.4.

The highest number of beds occupied during the year was 570 on 30th January. The lowest number occupied beds was 422 on 29th October.

The average length of stay per patient is 44.4 days, while in the previous year it was 49.07. Although there is some diminution in the average length of stay per patient, the figure remains high for three reasons:—

- 1. The high proportion of chronic sick which is unavoidable in a Municipal Hospital.
- 2. The large number of long-stay mental cases.

3. The non-existence of an out-patients' department renders it necessary to detain in hospital a large number of cases that could be otherwise treated as out-patients.

#### CO-OPERATION WITH GENERAL PRACTITIONERS.

Letters are now being sent regularly by the resident medical staff to medical practitioners on discharge of their patients. These letters, which are much appreciated by local practitioners, contain particulars of any investigations made, operations performed, and treatment given.

#### STATISTICAL TABLES.

Remaining in I	Hospi	tal,	Janua	ary 1	st, 19	933					511	
Admitted											3,683	
Born in Hospi	tal										318	
												4,512
Discharged											3,401	
Died							• • •				658	
Patients treated to a conclusion during the year 4,059												
Remaining in Hospital on 31st December, 1933 453												

The following table gives an analysis of the deaths according to age:—

		Ages			- 4	General	Mental	Total
Under 4 W	eeks		• • •			17		17
Under 1 Ye	ear		•••		• • •	5		5
1 2				• • •		5	—	5
2 5	• • •				• • •	6	—	6
5—15				• • •	• • •	6		6
15—25			• • •		• • •	21	—	21
2535						23	4	27
35—45			•••		• • •	46	3	49
4555			•••		• • •	60	2	62
55—65		• • •	•••			103	7	110
Over 65			* * *	• • •	• • •	335	15	350
			Total			627	31	658

			Cas	e Mortality	у.
	Treated.	Died.	]	Per cent.	
Medical cases	 2,458	 549		22.3	
Surgical and Obstetric cases	 1,601	 109	• • •	6.8	
	4,059	<b>65</b> 8			

A survey of these figures reveals the fact that, with the exception of the first four weeks of life, there is a progressive increase in the mortality rate, and that after the age of 55 there is a pronounced increase in the number of deaths. The mortality figure between the age of 55-65 is almost double that of the previous decade, whilst the number dying over the age of 65 is more than three times that of 55-65 age group.

More than half the total number of deaths during the year is accounted for by cases over the age of 65.

#### AVERAGES FOR THE YEAR.

Beds—Daily complement (including cots)	• • •		529
Beds—Daily number available	• • •		529
Beds-Average daily number occupied		•••	494.3
Average daily percentage of available beds occupied			93.4
Patients for occupied bed—average number per annum			7.5
Admissions—Average daily number			11
Stay—Average length in days per patient			44.4
Deaths—Case mortality per cent			16.2
Maximum number of beds occupied=570, 30th January, 1933.			
Minimum number of beds occupied = 422, 29th October, 1933.			
Nursing Staff-Average daily strength (excluding Male and	Men	tal	
Staff who are non-resident)			115.8

#### DISEASES TREATED.

The following table gives the classification of diseases and conditions for which the 4,059 patients were primarily treated during 1933:—

	Children Under 16 years of age		Men and W	Jomen
	Discharged	Died	Discharged	Died
Acute Infectious disease (viz., Measles, German Measles, Chicken Pox, Whooping Cough and Mumps)	14		23	
Influenza, including Influenzal	4	• •	50	1
Pneumonia Tuberculosis— Pulmonary	3	• •	37	30
Non-pulmonary	5	4	8	4
35.41		7	61	75
Rheumatism—  (1) Acute Rheumatism (rheumatic fever) together with subacute rheumatism and chorea  (2) Non-articular rheumatism,	8	••	22	2
including muscular rheu- matism, fibrositis, pleuro- dynia, lumbago and sciatica	4	١	15	
(3) Chronic arthritis		• •	29	• •
Venereal disease	• •	• •	6	• •
Puerperal pyrexia Puerperal Fever— (a) Women confined in hos-	••	• •	1	
pital	• •	• •	12	3
(b) Other cases Other diseases and accidents connected with pregnancy and childbirth	••	• •	83	••
Mental Disorders—  (a) Senile Dementia	••	• •	27	16
(b) Other	1		221	18
Senile decay			17	87
Accidental injury including suicides, attempted suicides,				
and poisoning cases  Disease of Nervous System and	71	1	250	21
Sense Organs	28	4	173	64
Disease of Respiratory System	148	6	239	114
,, Circulatory System	1	4	76	95
,, Digestive System	61	2	350	27
,, Genito-urinary System	28	2	196	39
,, Skin	17	1	39	1
Other diseases  Mothers and infants discharged from maternity wards not included in above figures—	154	3	284	19
Mothers	•••		343	5
Infants	292	10		
	839	37	2,562	621

#### SPECIAL DEPARTMENTS.

The following table summarises the work of the special departments of the hospital:—

1.	Surgical	Major Operations Minor Operations	925 361 —— 1,286
2.	Anæsthetics	General	917
		Spinal & Sacral Block	170
		Local	130
		Avertin	26
		Evipan Sodium	43
			1,286
3.	Radiological	Patients Investigated .	968
		Examinations	2,524
4.	Massage and Electro-therapeutics	Patients	557
	1	Treatments	6,976
5.	Maternity—Number admitted	Borough	236
0.	materinty and admitted	County	96
			332
		Births	315
		Obstetric Operations	45*
6.	Pathological		
0.			1,596
7.	Ear, Nose and Throat Operation	s	211‡
8.	Nurses' Sick Room Admissions	•••	93

<sup>\*</sup> Nine of these operations are included in the number of major operations (Cæsarian section).

#### OPERATIONS AND ANÆSTHETICS.

The total number of operations performed during the year was 1,286. This number includes 37 dental operations. A general anæsthetic was administered in 917 cases, the remaining 369 cases being subjected to one of the other forms of anæsthesia.

The adaptation of the theatre equipment, appliances, instruments, etc., to modern requirements, and the transfer of such outworn theatre equipment to the wards, as would prove useful, has been commenced. The principle of the employment of stainless steel where practicable has been approved as a measure of ultimate economy. Modern surgery in a training school for nurses calls for a theatre suite larger and more comprehensive than the one in existence.

<sup>‡</sup> These operations are included in the total number of surgical operations.

An instrument room, a linen and sewing room, a nurses' dressing room and cloak room, a surgeons' room and a minor operating theatre are required to complete the unit and deal efficiently with the ever-increasing work of this department. It will also facilitate the proper training of the nursing staff in this phase of their work and serve to co-ordinate the surgical services of the hospital.

The following table gives an analysis of the operations performed during the year:—

	Pati	ents	Nu	rses	Total
GENERAL	Major	Minor	Major	Minor	Total
On skin and superficial structure	68	46		4	118
On arteries	7			_	7
On nerves	12	5		_	17
On bones and joints	22	9	_	_	31
On muscles, tendons, bursæ	8	_			8
Amputations	9		_		9
On skull	8	5	_		13
On face	16	5	_	Massife sufficie	21
On eye	1				1
On mouth and pharynx	7	2	_		9
On thyroid and glands of neck	17	3			20
On breast	13	1	_		14
On thorax	17		_		17
On abdominal cavity	243	_ 1	2		245
On stomach and duodenum	20				20
On investine, rectum and Anus	89	27	1	_	117
On liver, gall bladder and pancreas	21		_		21
On kidney and urinary tract	35	38	_	_	73
On male genital organs	16	39	_	_	55
On female genital organs	82	54	—		136
SPEC1AL	711	234	3	4	952
Obstetric	63	13			76
On ear, nose and throat	148	62		1	211
Dental operations		37			37
Bronchographies		10			10
Grand Total	922	356	3	5	1,286
Major operations					925
Major operations	• •••	•••	• • •	• • •	
Minor operations	• •••	•••	• • •	• • •	361
					1,286

OPERATIONS PERFORMED IN THE	ATRE

		General	Ear, Nose and Throat	Total
By Medical Superintendent	••	501	56	557
By Senior Assistant Medical Officer .	• •	457	80	537
By Visiting Surgeon		96		96
By Assistant Medical Officers		20	75	95
By Ophthalmic Surgeon	•••	1		1
Totals .	•••	1,075	211	1,286

The total number of abdominal sections performed was 377, including 165 appendicectomies.

The total number of tonsils and adenoids cases subjected to operation was 198. Dissection was the method of choice in 136. Children under 5 residing in the Borough and children in attendance at a school maintained by the Southend Education Committee are not admitted to this hospital for tonsils and adenoids operation.

	1933.	1932.
Number of Surgical Operations	 1,286	959
Number of Abdominal Sections	 377	362

Pre-operative medication is now extensively employed at the hospital, so that the great majority of patients on being conveyed from the ward to the operating theatre are either already anaesthetised or in a state of twilight sleep. Inhalation anæsthesia is being increasingly displaced, so that post-operative chest complications have been markedly reduced and vomiting is considerably diminished. The use of a warm mixture of carbon dioxide and oxygen in all cases where inhalation anæsthesia is the method of choice has also contributed to the diminution in the incidence of post-operative chest complications.

#### RADIOLOGICAL DEPARTMENT.

The number of radiological examinations made in 1933 was 2,524, compared with 1,409 in 1932, which represents an 80 per cent. increase. There is an ever-increasing demand for radiological investigations as an aid in detecting the earliest possible evidence of disease, and general practitioners attach considerable importance to the special investigations which are now the vogue for helping to establish or negative a provisional diagnosis. It is also the recog-

nised practice to carry out X-ray examinations in all non-acute surgical cases, if possible, in order to prevent a patient being subjected to operation needlessly.

Medico-legal considerations demand that all cases of suspected fracture shall be submitted to radiological examination, and it will be noted that the maximum number of radiograms were taken in cases of injury.

The X-ray unit in use is now quite out-of-date, and frequently satisfactory films cannot be obtained even when repeated, which adds very materially to the expense incurred. The modern technique of radiography cannot be put into practice with the existing apparatus. The portable set serves its purpose well, but its daily transit over rough hospital roads and paths sets up a vibration which damages it, so that from time to time it is out of action until the necessary repairs are effected.

By reason of the fact that the accommodation provided is inadequate, both patients and staff are inconvenienced in no small degree.

The resident medical staff are called upon to do their own screening of chests, Barium Meals, Barium Swallows, etc., and to record the interpretation of their appearances. It is recognised that this work is beyond the scope of the resident medical staff, and that the hospital interests would be better served by the assistance and advice of a radiologist.

				Patients	Numbe	er of Examina	ations.
			E	Examined.	Films.	Screening.	Total.
Hospital Patients			 	839	2,095	58	$2,\!153$
T.B. Out-patients		• • •	 	129	140	231	371
	T	otal	 	<b>96</b> 8	2,235	289	2,524

#### ANALYSIS OF INVESTIGATIONS MADE DURING 1933.

Skull for injury							• • •		27
Skull and cranial cavity fo	r diseas	se		• • •					36
Lungs and Mediastinum									237
Heart and Aorta									50
Oesophagus, stomach and	intestin	es							108
Gall bladder					•••			•••	42
Urinary system									113
Obstetric abnormality									69
Bones and joints for injury	•••	• • •	• • •			• • •			260

Bones and joints	for dise	eases,	malf	orma	tion o	or def	ormi	ty			107
Foreign bodies				• • •		• • •	• • •				7
Dental				• • •		• • •					5
Miscellaneous .			• • •	• • •	• • •				• • •	•••	42
S	PECIAL	MET	CHOI	OS O	F IN	VEST	NIGA	TIOI	Ĭ.		
Barium meal						• • •	•••	• • •			71
Barium enema	••								• • •	• • •	37
Cholecy stograms	5		• • •			• • •					13
Lipiodal injection	ns	• • •									15
Pyelograms retro	grads									• • •	17
Pyelograms intra	venous		• • •								30
Number of radio	grams ta	aken	• • •	• • •		• • •			• • •		2,524
Average number	of radio	gram	s per	patie	ent e	xamin	.ed	• • •		• • •	2.6
The largest numb	per of exa	amina	itions	were	e in c	onnec	tion	with	injuri	ies	
of skull, bone	es and jo	oints		• • •	• • •		• • •				287
The next largest conditions cl culosis.			`	*		u, .					

#### MASSAGE AND ELECTRO-THERAPEUTIC DEPARTMENT.

The treatment given in this department comprises massage, galvanism, faradism, ionization and radiant heat.

The work of this department is seriously handicapped by a lack of accommodation and equipment. A very small room is available for ambulatory in-patients and massage out-patients, there being no waiting rooms or ante-rooms for special treatments. No apparatus is available for diathermy, sinusoidal current, ultra-violet or artificial sunlight, and there is neither the accommodation nor the equipment for remedial gymnastics.

						E'ectro-
				Massage.	•	l'herapeutic.
Number of In-patients treated	• • •			407		97
Number of Out-patients treated		• • •		41		12
				<b>44</b> 8		109
Number of In-patient treatments			• • •	4,656		1,286
Number of Out-patient treatments				813		221
				5,469		1,507

Patients	Massage	Electro-therapeutic	Total
Number treated Number of treatments	448	109	557
	5,469	1,507	6,976

Applications of radiant heat made in conjunction with tannic acid in treatment of burns and scalds are not included.

Medical—Cases treated in this department 312 = 56%Surgical—Cases treated in this department 245 = 44%Total cases treated 557 = 100%

### MATERNITY DEPARTMENT.

The Maternity Section receives cases from the Borough's antenatal clinics, both for the treatment of the complications of pregnancy and for confinement. Maternity cases resident outside the Borough are admitted on a Relieving Officer's Order, and cases of emergency or of complicated puerperium are admitted on a doctor's recommendation.

The number and distribution of the maternity beds in the hospital remains unchanged. There are 14 maternity beds, 6 of which are in Canewdon Ward and the remaining 8 in Chalkwell Ward. Beds are also allocated in Chalkwell Ward to ante-natal cases, and on 31st December there were 9 such cases.

There has been a slight decrease in the work of this department during 1933, the number of confinements being 315, compared with 331 in the previous year. This may be explained by a universal decline in the birth-rate, but there may be other operating factors. Of the 315 mothers admitted, 283 (or 90 per cent.) were from the ante-natal clinics, the remaining 32 (or 10 per cent.) being admitted as emergency cases. Of the 315 admissions, 32 (or 10 per cent.) were unmarried whilst 135 (or 43 per cent.) were first pregnancies.

### The presentations were as follows:—

Vertex—Occipito anterior	• • •			 			279
Occipito posterior			• • •	 			21
Breech—Uncomplicated		• • •		 			4
Complicated			• • •	 	• • •		14
Face and brow	• • •	•••	• • •	 • • •	• • •	•••	
Transverse			• • •	 • • •	• • •		
Born before admission				 •••			

There were three sets of twins, both presenting by breech in two sets, and the other set by breech and vertex occipito-anterior respectively.

Induction of labour was undertaken in 10 cases, all of which were successful, forceps delivery being necessary in one instance. There was one foetal death, but no maternal or neo-natal deaths in these cases.

The method of delivery in the 318 cases was as follows:—

$\operatorname{Method}$	No.	Deaths				
Method	NO.	Maternal Foetal		Neo-natal		
Natural delivery	258		6			
Natural forces after induction	9		_			
Forceps	26	1	1	1 -		
Failed forceps	2		1			
Forceps after induction	1		1			
Breech complicated	11	_	6			
Internal version	1	_	_	<del></del> -		
Cæsarean Section	9		_	1		
Craniotomy	1	1 1		_		
	318	2	16	2		

Midwives delivered in 270 cases, whilst delivery was effected by medical officers in 45 cases, including 9 instances in which delivery was by Cæsarean Section. Medical aid was sought by the midwives in 88 cases. In 255 instances (81 per cent.) labour was normal, in 57 (or 18 per cent.) was abnormal, and 3 cases (or 1 per cent.) were instances of multiple labour.

Delivery was by Cæsarean Section in 9 instances; of these, 2 were patients admitted as emergency cases for operative delivery owing to contracted pelvis; the remaining 7 were admitted from the Ante-natal Clinic, the indication for operation being contracted pelvis in 6 instances (in one of which Cæserean Section had previously been performed), and varicose veins of vagina and vulva in the remaining case. There were no maternal deaths, but one neo-natal death. Three of the patients were sterilised at the operation.

Of the births, 289 (or 90.9 per cent.) were at full term, 13 (or 4.1 per cent.) were premature, and 16 (or 5 per cent.) were still-births.

The number of anæsthetics given for obstetric purposes was 60. The average length of stay of the patients was 23 days. The number of infants not entirely breast-fed was 10.

There were 16 still-births, particulars of which are given in the following table:—

Maternal Complications	Method of Delivery	Infant	Cause of Foetal Death
Antenatal Cases			
Complicated Breech	Breech	F.T.	Complications of Labour
,, ,, ,,	,,	F.T.	,,
,, ,, ,,	,,	F.T.	,,
,, ,, ,,	,,	F.T.	Intra-cranial hæmorrhage
Prolonged Labour P.O.P.			
(M.D.)	Forceps	F.T.	Complications of Labour
Prolonged Labour P.O.P.	,,	F.T.	,,
Prolonged Labour (M.D.)	Craniotomy	F.T.	,,
Placenta Prævia	Normal	Р.	Maternal condition pre- maturity
Eclampsia	Breech	F.T.	Maternal condition
None apparent	Normal	F.T.M.	Undetermined
,, ,,	,,	F.T.M.	
Emergencies	,,		,,
Placenta Prævia	Normal	P.	Complication of Labour
Failed Forceps	Forceps	F.T.	,, ,,
None	Breech	F.T.	Anencephaly
Placental Infarction	Normal	F.T.M.	Maternal condition
None	,,	P.	Prematurity

F.T. =Full Term

F.T.M. =Full Term Macerated

P. =Premature

P.O.P. = Persistent Occiput Posterior

M.D. = Maternal Death

whilst the causes of the still-births is shown in the following table:-

Cause of Still Birth	Antenatal Cases	Emergency	Totai
Maternal condition  Complications of Labour  Placental states  Foetal states  Undetermined	1 6 1 1 2	1 2 2	1 7 3 3 2
Total	11	5	16

There were 10 deaths of infants within 10 days of birth; of these 4 were due to prematurity, 3 to congenital abnormality, 1 to birth injury, hæmatemesis and atelectasis respectively. The congenital abnormalities were Patent Ductus Arteriosus, Malformation of midgut, and Anencephaly respectively, the diagnosis in the two former cases being confirmed by autopsy, as also was the case of atelectasis.

Of the 318 births, 16 were still-births and 10 live infants died, a mortality of 8.1 per cent. Of the 302 infants born alive, 10 died, a mortality of 3.3 per cent. Of the 13 premature infants born alive, 4 died, a mortality of 30.3 per cent.

The following table gives particulars of maternal morbidity, i.e., all fatal cases and all cases in which a temperature of 100.4 or more is maintained for a period of 24 hours or recurs during that period in the puerperium (Ministry of Health standard):—

DELIVERIES (no deaths undelivered)	Antenatal Clinic	Emergency	Total
	283	32	315
Pyrexial cases that survived  Pyrexial cases that died  Non-pyrexial maternal deaths	5 1 1	6 2 2	11 3 3
Pyrexial cases and maternal deaths	7	10	17
Maternal morbidity per cent	2.4	31.2	5.3

There were 6 maternal deaths, 2 of which occurred among the 283 patients whose admission had been arranged prior to operation (0.7 per cent.), and 4 among the 32 emergency admissions, or 12.5 per cent. The mortality per 100 confinements was consequently 1.9 per cent.

The 6 maternal deaths comprised 4 Borough and 2 County patients, the causes of death being as follows:—

### Delivered in Hospital.

Borough	cases—Puerperal	Septicæmia	following	Р.Р.Н.			• • •	1
	33	,,	,,		•••	• • •	•••	1
	Cerebral	Embolism						1

County cases—Nil.

Not delivered in Hospital.

Borough case—P.P.H. Retained P'acenta		 	 	 1
County case—Puerperal Septicæmia		 	 	 1
Post partum Eclampsia	• • •	 	 	 1
				6

The number of cases of abortion, excluding therapeutic inductions and threatened abortions, treated to a conclusion was 73 with 1 death, or a maternal mortality of 0.73 per cent.

It is recognised that the accommodation provided at the hospital for maternity cases is totally unsuited for the purpose, and that real difficulties are encountered in attempting to practise modern principles of treatment. The erection of a maternity block which will meet modern requirements is contemplated and is urgently needed. The creation of the post of Staff Midwife and the appointment of two Staff Midwives have ensured the constant attendance of a fully trained and responsible midwife in this department and has relieved the Matron of a good deal of anxiety.

### PATHOLOGY.

Since 1st August, 1933, specimens which were formerly sent by post to the Clinical Research Association in London have been delivered daily to the Pathologist at the new Southend General Hospital. This has proved a very satisfactory arrangement in every way. The Pathologist at the Seamen's Hospital, Greenwich, continues to do the Wassermann reactions, and Sputa, Throat Swabs, Cervical Swabs and smears and Widals are examined at the Borough Sanatorium. The number of pathological examinations made during 1933 was:—

Various (Southend General Hospital)		• • •	• • •	920
Wassermann Reactions	• • •	•••	• • •	441
Sputa			• • •	149
Throat Swabs		•••	• • •	48
Swabs and Smears for Gonococci	• • •	•••	• • •	38
Widals			• • •	3

1,599

### DISPENSARY.

The issues of drugs and dressings by the Dispensary furnishes one of the most reliable guides to the amount of work being done at the hospital. The storage space is now inadequate, and there is no ante-room available as an office for the necessary record-keeping and costing.

Miscellaneous Issues—Approx. 600 per week.

Prescriptions—Including medicines, lotions, ointments, etc., approx. 900 per week.

Prescriptions—Dispensed under the Dangerous Drugs Act, 660.

Number of items entered quarterly in Dispenser's Book, 640.

### DRESSINGS ISSUED FROM DISPENSARY DURING 1933.

Items	Jan. to March	Apl. to June	July to Sept.	Oct. to Dec.	TOTAL
Bandage <b>s.</b> O.W. Various Sizes.	3,624	4,056	4,020	4,440	16,140
Bandages, all other kinds. No.	124	111	115	103	453
Batiste and Jaconet. Yds.	111	110	150	88	459
Lint Boric. Lbs.	53	156	162	141	512
Lint White. Lbs.	220	250	243	288	1,001
Gauze in 6 yd. pkts. Pkts.	1,316	1,512	1,800	1,548	.6,176
Tow. Lbs.	236	232	287	197	952
Wool Grey. Lbs.	253	251	205	161	870
Wool White. Lbs.	587	748	661	722	2,718

### HEALTH OF NURSING STAFF.

The health of the nursing staff continues to be satisfactory, as will be gathered from the following table:—

Number of Resident Nurses at 31st December, 1933	•••	• • •	117
Average daily strength of Nursing Staff	• • •		115.8
Nurses off duty sick during the year			93
Nurses off duty sick more than once (included in above)	•••	• • •	20
Nursing days lost		1,	058
Average number of days lost per annum—			
Per Sick Nurse			11.3
Per Nurse on average daily strength			9.1

Disabilities		No.	Major Operation	Minor Operation
Influenza and its complication Tonsillitis Septic Condition of Skin Constipation Pyelitis Scarlet Fever Effects of Vaccination Poly Articular Arthritis Epistaxis Hæmorrhage following Extra Appendicitis Cysts of Scalp		26 24 13 6 2 1 1 1 1 2 2	— — — — — — — — — — — — — — — — — — —	Operation
Synovitis	 	$ \begin{array}{c c} 1 \\ 2 \\ 7 \\ 6 \\ \hline 97 \end{array} $	1 — — — — 3	1 - 1 - 5

In concluding my report, I pay a tribute to the loyalty and cordial co-operation of the hospital staff of all departments, including the medical officers, the nursing, administrative and domestic establishments. The Matron has been indefatigable in her efforts to advance the comfort of the patients and to procure the best possible conditions for her staff, and has inspired them to a devotion in their work which surmounts all obstacles. To the Resident Medical

Staff I am especially indebted for their loyal support and for their zest and energy in assisting me to increase the efficiency and improve the standards of treatment in the hospital.

I desire also to express my sincere thanks to the Consulting Staff, who have been indispensable to me in the treatment of difficult cases and have provided invaluable help at all times. I am also indebted to the Hospital Chaplains for their valued co-operation in ministering to the well-being of the patients and staff.

I thank the Health Committee for the confidence they have placed in me, for the sympathetic consideration they have always given to my suggestions, and for their whole-hearted support in dealing with the problems relating to the hospital's administration and development.

S. CIEMAN,

Medical Superintendent.

March, 1934.



### Southend-on-Sea Education Committee

### ANNUAL REPORT

OF THE

### SCHOOL MEDICAL OFFICER

FOR THE YEAR

1933.

### 1.—CHILDREN'S CARE SUB-COMMITTEE OF THE EDUCATION COMMITTEE.

Which controls the School Medical Service.

November 1933—October 1934.

Mr. F. W. SQUIER, J.P., Chairman.

Members of the Education Committee—

Mr. Ald. R. V. Cook, J.P. Mrs. Coun. C. Leyland.

Mr. F. W. SQUIER, J.P. Mr. Coun. C. J. TUNNICLIFFE.

Mr. H. TREBY.

### Ex-Officio—

Mr. Ald. S. F. Johnson, J.P., Chairman of the Elementary Education Sub-Committee.

Mrs Coun. M. Broom, Chairman of Town Council's Infant Care Sub-Committee.

### Co-opted Members-

Mrs. Barrie. Mrs. Lambert.

Mr. A. E. PUDDICOMBE. Mr. W. ENEVER.

Mr. G. D. Rose. Miss C. Thompson.

Miss A. Pearce. Mrs. Wheeler.

Mr. H. PILCHER. Mr. F. OSMAN.

Mr. J. I'Anson.

The following report is drawn up on lines required by the Board of Education.

### II. STAFF OF THE SCHOOL MEDICAL SERVICE.

### (a) Whole Time Officers—

School Medical Officer-

Charles Grant Pugh, M.D. (Lond.), B.Sc. (Lond.), D.P.H. (Camb.), (also Medical Officer of Health).

### Assistant School Medical Officers—

G. E. Basham Payne, M.B., B.S. (Lond.), D.P.H.

Jeannie Kean, M.B., Ch.B. (Edinburgh), D.P.H. Commenced duty 16th September, 1933, vice Dr. Doris L. Durie (Resigned).

### Dentists—

Basil Crisp, L.D.S. (Eng.).
Edgar Crees Austen, L.D.S., R.C.S. (Eng.).

Health Visitors who also act as School Nurses-

Miss G. Hedger.

Miss N. Hitchcock.

Miss E. Prophett.

Miss K. M. Burnett.

Miss V. Crump.

Miss M. Butcher.

Miss M. W. Clarke.

Miss E. C. Brooks vice Miss E. H. Sexton, resigned.

Miss I. M. Evison vice Miss M. Taylor, deceased.

Miss F. E. Jennings.

### Clinic Nurse—

Miss V. W. I. Philbey.

### Dental Nurse—

Miss G. A. McNicol.

### Clerks—

Miss D. I. Allsop.

Miss G. E. Kirby.

Miss M. Monro.

### (b) Part-time Officers—

Ophthalmic Surgeon—

Dr. D. D. Evans, M.B., B.Ch., M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.O.M.S.

Surgeon for Operative Treatment of Tonsils and Adenoids—

Mr. C. Hamblen Thomas, F.R.C.S. (Eng.).

Superintendent of Remedial Treatment Centre—Miss Ruth H. Shepherd.

- 111. Co-Ordination.—The Health Visitors continue to act as School Nurses in their respective areas which are based on the School District.
- IV. School, Hygiene.—The Council's Schools are of relatively modern construction and some of the older schools have been modified to bring them up to present day requirements. Eastwood School and one of the two schools at Shoeburyness which are situate in the areas added to the Borough on October 1st are overcrowded and will require considerable structural alterations to bring them up to the standard of the other Provided Schools.
- MEDICAL INSPECTION.—The age groups of the children subjected to routine medical inspection during the year were those prescribed in the Board of Education's Regulations, all new entrants to the schools from private schools or from Council schools in other areas being also medically inspected irrespective of their age. With the addition of the three schools in the added area, it is no longer possible to visit as in past years every school at least twice each year. The experience gained since the extension of the Borough has clearly shown the necessity of weekly Inspection Clinics both at Shoeburyness and at Eastwood, which are not possible with the present medical staff, and in this connection the work undertaken at the Secondary Schools, which is steadily increasing, has to be borne in mind. The Education Committee will be advised that the part-time services of another Medical Officer are required to enable the School Medical Service to be conducted on efficient lines, and that the proposed rearrangement of the Medical Staff of the Public Health Department will enable the Deputy Medical Officer of Health, none of whose salary

is at present charged to the Education Account, to render very necessary assistance in coping with the work of the School Medical Service.

The numbers of children medically examined are given in the Board of Education Tables at the end of the report, and it will suffice to say that the number of children routinely medically inspected at public elementary schools during the year was 4,648, of which 1,350 were entrants aged 5 or 6,886 were intermediates aged 8, and 1,474 were leavers aged 12 or over, whilst 469 were of various other age groups. The number of children medically examined owing to suspected illness or defect was 5,400, while there were 7,990 re-inspections. The total number of medical examinations of elementary school children consequently was 13,390, which is only 250 fewer than in the previous year, notwithstanding that Dr. Doris Durie's resignation in June led to the medical staff being below strength for several months.

AT MEDICAL INSPECTION.—These call for no VI. FINDINGS special comment being similar to those recorded in previous reports. Only 14 children were reported to be suffering from malnutrition requiring treatment as compared with 19 in 1932. Ringworm of the scalp, of which only three cases came under notice, is becoming a relatively uncommon ailment, doubtless as a result of the more frequent recourse to X-Ray treatment at an early stage, and consequent shorter periods of infectivity. There was a marked reduction in the number of children referred for operation for tonsils and adenoids, which doubtless in the main is accounted for by the instruction that operative treatment should only be advised after all other methods of treatment had failed and when it was apparent that the conditions were definitely affecting the child's health and well-being. Apart from this, however, there was a diminution in the number of children found to have adenoids or enlarged tonsils to a pathological degree as is apparent by the reduction in the number referred for observation. Ear discharge was noted to be present in a slightly higher proportion of the children examined and this is probably to be accounted for by the recent unusual prevalence of Scarlet Fever. The records as regards cleanliness are somewhat marred by the inclusion of the figures relating to the schools in the added areas at which a large number of exclusions on account of verminous conditions was found to In the schools in the rest of the Borough, the high standard recorded in previous years is being maintained, although routine hair and scalp examinations at regular intervals with

periodic special visits are necessary to ensure this; the majority of exclusions occur on the re-opening of the schools after the holidays and are limited to members of a few families only.

VII. INFECTIOUS DISEASE.—There was, in the last few months of the year, an unusual incidence of Scarlet Fever, the Borough partaking with other areas in the Home Counties in a widespread outbreak of the mild type of the disease. There was no exceptional incidence of Diphtheria and the other infectious diseases caused no unusual loss of school attendance.

VIII. "FOLLOWING UP" AND WORK OF NURSES.—The following is the summary of the work carried out by the Health Visitors in visiting the homes of school children found to have defects, etc.

				N	umber of children.	Number of Visits.
Enlarged tonsils, adenoic	ds, mo	outh bro	eathin	ıg	725	1280
Squint or Defective Vis	sion	•••		• • •	255	355
Deformities		•••		• • •	36	85
Verminous conditions	• • •			•••	371	542
Infectious Diseases			•••	•••	700	- 2414
Contagious Skin Disease	es (In	npetigo	, Sca	bies,		
Ringworm)	•••	•••	•••	•••	124	246
Malnutrition, Neglect, &	Rc.	• • •		• • •	52	95
Defective Teeth		• • •	• • •	• • •	55	75
Tuberculosis	• • •	•••	• • •	• • •	65	280
Other conditions, e.g., E	Blepha	ritis, E	Bronch	itis,		
Otorrhoea, &c.			• • •		821	1345
					3204	6717

IX. MEDICAL TREATMENT. MINOR AILMENTS.—The following table shows the conditions needing treatment and the number of attendances of children at the Minor Ailment Clinic.

	٠		Chil	dren.	Attendances.
Verminous or nitty hair	•••	• • •	• • •	125	174
Impetigo		• • •		100	445
Scabies	•••	•••	•••	3	9
Ringworm of Skin	• • •	•••		2	9
()ther skin diseases	•••	•••		29	105
Conjunctivitis, Blepharitis, &c		•••	• • •	28	37
Ear Discharge, Wax in Ear, &c	ā			78	227
Cuts, Abrasions, Burns, &c.	•••	•••		206	512
	Т	otals	•••	571	1518

Scalp Ringworm.—The two children resident in the Borough referred to in last year's report as having had X-Ray treatment were re-admitted to school early in the year; of the three children residing in an adjoining district who were still excluded at the end of 1932, two were re-admitted after cure by local treatment after absences of 17th months and 19 months respectively, the lengthy exclusion being attributable to the parents' refusal to accept X-Ray treatment; the remaining child left during the year on account of age. One new case was detected at the end of the year and is about to receive X-Ray treatment.

Tonsils and Adenoids.—The following table shows the number of children receiving operative treatment under the Education Committee's Scheme during 1933 and each of the three preceding years, the children under 5 being treated at the expense of the Maternity and Child Welfare Committee:—

	1933	1932	1931	1930
Elementary School Children	165	326	352	309
Secondary School Children	1	2	4	5
Young Children under 5	45	32	52	32
	~			
Totals	211	360	408	346

The operations were carried out by the Specialist Surgeon at the approved Nursing Home, the fees paid to the Surgeon inclusive of the fees of the anaesthetist amounting to £233 2s. 0d. whilst the Nursing Home fees totalled £113 18s. 6d. In 71 of the 164 cases of elementary school children who received operative treatment, no contribution was required from the parents, in 47 the parents contributed  $1\frac{1}{2}$  guineas, and the remainder paid sums varying between 3/6d. and 25/- in accordance with the scale approved by the Committee.

The very considerable decrease in the number of operations performed is in part due to the fact that the majority of the older children who required surgical treatment had been dealt with in preceding years but is mainly due to an alteration in the criteria adopted; no child is now placed on the list for operative treatment until trials of other methods of treatment have proved fruitless. It is difficult to persuade some parents that operation is unnecessary or should be postponed until other measures have

failed, especially when operation has been suggested by their family doctors. All doubtful cases are referred to the Specialist Surgeon for his opinion prior to operation.

As stated in last year's report, the present scheme by which the operations are carried out in a Nursing Home at which the children are ordinarily resident for one night only after the operation, is unsatisfactory. During the year negotiations have taken place with the Board of Management of the Southend General Hospital and a new scheme providing for the operations to take place therein and for the children to be detained for at least two nights after the operation, is about to be submitted to the Board of Education for approval.

Dental Treatment.—The Dental Staff having been augmented in October, 1932, by the appointment of an Assistant Dental Surgeon to fill the vacancy which had existed since May, 1931, it has been possible during the past year to resume the former practice of carrying out each year the dental inspection of each child in attendance at the public elementary schools in the Borough, and at the end of the year much of the arrears of work had been cleared up. Of the children inspected, 56.5 per cent. were found to require dental treatment as compared with 57.4, 56.5, 46.3, 47.5 and 42.0 per cent. in each of the five preceding years. The increased percentage of those found to require treatment is probably not unconnected with the inability to carry out the routine dental inspections at the proper intervals since the reduction of the staff in May 1931.

Mr. Crisp, the Senior Dental Surgeon, has submitted the following report:—

It is with extreme satisfaction that I submit a report of the progress made during 1933 in the dental services of the Borough.

Out of a total of 11,530 children attending the elementary schools 9,892 were dentally inspected as compared with 6,677 the previous year. This means that practically every child from five years to fifteen was inspected during the year, being a great improvement on 1932, when owing to the increased number of acceptances it was necessary to re-appoint a second dental surgeon.

Of the 5,591 children invited to accept treatment 1,948 were actually treated at the school surgeries, being a percentage of 34.8 per cent. These figures are for routine children only and do not represent the total treated. Including the "specials" or "casuals" as they are better known, casuals being children who fail to attend when invited to do so at the school examination but

who subsequently attend on account of toothache, etc., the total number of children actually treated was 3,165 or 56.6 per cent. of those found to need dental treatment.

These figures are good and compare very favourably with those of other Boroughs employing full time dentists. They can and will be improved upon as greater help is forthcoming from the teachers in the various schools. The teachers can do so much to increase the acceptances by taking a real interest in the dental scheme and where they do so I am glad to report excellent returns.

I should like to take this opportunity of thanking all the teachers who have so kindly co-operated with myself and my assistant on the occasion of our visit to their schools. The calls made upon them from outside are many and must interfere with their ordinary routine, but the benefit obtained from regular dental attention is realised by them and has received in most cases their whole-hearted support.

Percentages of acceptances differ greatly in the various schools, being for two schools in the same area 48 per cent. and 64 per cent. respectively, a difference which is very difficult to explain, except on the assumption that in the one school the Head Teachers impress on the children and their parents the advisability of accepting the facilities available, whereas in the other no such influences are brought to bear. Schools attended by children of fairly well-to-do families show a higher percentage of acceptances than the schools in the poorer areas, which is all the more surprising having regard to the fact that many of the pupils at the former schools receive treatment privately and not at the Clinic, not a few of the acceptance cards being returned with a note expressing gratitude for the parents' attention being called to early caries of a tooth and stating that the child would be taken to the family's dental surgeon.

Educational lectures by qualified members of the Dental Board given in the form of simple talks at the school are a great help and serve to impress on the children the advisability of proper care of the teeth. The many leaflets issued by the Board for distribution at the school also have a good effect in instilling in the minds of the children the ill-effects of failure to receive dental treatment when such is indicated.

Many appointments are not kept on account of the sixpenny fee charged per visit for each child. In the case of parents with three or four in family who have all to attend for treatment this is sometimes too much in these hard times and it would be far better to treat the whole family for the payment of one sixpence only.

As regards old offenders, i.e., children who continually come before us at the routine examinations and who never intend to present themselves for treatment under any circumstances whatever, the suggestion of the Chief Medical Officer is an ideal one and should be put into operation. This is that children in the senior

schools examined for three successive years and who do not avail themselves of the privileges offered should be excluded from further dental examination.

I would suggest in adopting this measure that a letter be sent to the parent, pointing out the real urgency for treatment and the futility of further dental examinations at school if the parents fail to avail themselves of the facilities for treatment which are offered.

It has been possible during the past year to carry out the complete scheme under which all children are examined each year. The expansion of the Borough and the inclusion of three more schools accommodating 1,659 children will throw the scheme back a little, but a better idea of the effect of this and as to whether more help will be necessary, can be obtained next year.

In respect of children referred by Medical Officers from the Infant Welfare Clinics, I am in favour of treating these children only in cases of urgency, such as acute abscesses and other septic conditions. Young children who need extensive conservative treatment only are extremely difficult to treat as only in a few cases is it possible to drill or excavate the cavities. A bad impression gained at this pre-school age is very damaging, and a child once frightened, as most dental officers know, is a very difficult patient to treat on future occasions.

In closing I should like to pay tribute to the excellent service rendered by our dental nurse. Her duties comprise of supervision and management of the children, preparation of materials for the use of the dentists, cleaning and sterilising instruments, as well as an abundance of clerical work in making appointments and recording and charting all work undertaken at the Clinic. The appointment of a second nurse would be very desirable as it is impossible successfully to wait on two dental surgeons at the same time. Also it leaves one surgeon unaided when the schools are being visited for routine examination.

Eye Clinic.—The Eye Clinic was held on 93 sessions during the year, the number of children treated and the number of attendances being as follows:—

		N	ew Cases.	Old Cases.	Attendances.
Elementary Pupils	• • •	• • •	345	330	1823
Secondary Pupils	• • •	•••	79	102	411
Young Children under	5		13	8	53
			437	440	2287

The following table shows the results of the refractions:—

Defect.	Elementary School Children.	Secondary School Children.	Young Children under 5.	Total,
Myopia—Uncomplicated	83	50		133
with Squint	1			1
Simple Myopic Astigmatism	9	••	••	9
Compound Myopic Astigmatism	73	44		117
with Squint	14	• •		14
Hypermetropia				
with Amblyopia	89	11	1	101
with Squint	40	8	6	54
Simple Hypermetropic				
Astigmatism	69	18		87
with Squint	6	2		8
Compound Hypermetropic				
Astigmatism	85	14	2	101
with Squint	47	3	3	53
Mixed Astigmatism	28	10		38
with Albinism			• •	
Anisometropia	5	1		6
with Squint	1		• •	1
No error of Refraction		3	2	5

Specialist Ophthalmic Surgeon at the Eye Clinic are made up at contract rates by a local Optician at the parents' expense. In 43 instances of necessitous children, spectacles were provided at the expense of the Education Committee.

Crippling Defects and Orthopaedics.—No scheme for orthopaedic treatment is yet in being, but during the year representatives of the Council's Committees have conferred with members of the Board of Management of the Southend General Hospital, and it is anticipated that it will be possible at an early date to submit proposals relative to the orthopaedic treatment of school children and young children under 5 to the Board of Education and the Ministry of Health respectively for approval. As in past years, children needing advice and treatment for crippling deformities

have been referred to the Orthopaedic Department of the Southend General Hospital and the Council's Committees are indebted to the Board of Management and to Mr. Whitchurch Howell, the Specialist Orthopaedic Surgeon, for their assistance in the matter. The number of school children thus referred during the year was 12, all of whom received appropriate advice and treatment, many other children resident in the Borough also attending the Orthopaedic Department although not specially referred thereto by the Committee's Officers.

During the year the Education Committee supplied at a cost of £2 12s. 6d. one child with a surgical appliance to enable him to attend at school and also paid 12/6d, for repairs to an artificial leg of another boy.

The Remedial Treatment Centre continues to be held twice weekly during school terms at the temporary building at the Hamlet Court Road Schools. During the year, the Centre was open on 85 sessions, 38 children receiving treatment by active and passive exercises, massage, etc., directed to the correction or improvement of various conditions causing deformity. 18 of deformities dealt with comprised 17 cases of scoliosis, Kyphosis, 5 of deformities of chest wall, 10 of Knock knees, one of marked Lordosis, and one of severe flat foot, some of the children suffering from two of the deformities mentioned. During the year 15 children ceased attendance, 11 having left school, two having removed from the Borough, and two being discharged as no longer needing remedial exercises. On the Orthopaedic Scheme coming into operation, it is intended to bring the work at the Remedial Treatment Centre into relation with the Orthopaedic Clinic, so that the advice of the Specialist Orthopaedic Surgeon will be available in the treatment of the more severe forms of deformity which require remedial exercises.

X. The Open Air School.—The results obtained at the Open Air School continue to confirm the impressions of its usefulness gained during the first year after its opening in 1929. The number on the roll at the commencement of the year was 96, there were 50 admissions during the year whilst 51 children were removed from the roll, five on leaving the town, five on account of age, and 41 on being transferred to ordinary schools as no longer requiring to attend the Open Air School. The school is visited once weekly by one of the Medical Officers who carries out routine medical inspections, confers with the parents and supervises the dietaries, bathing, and physical exercises of the

children. The improvement in the weight, general nutrition, mental alertness, and physical energy of the majority of the children after a few months attendance, are striking and the parents are genuinely appreciative of the benefits which have been derived. In some cases, however, there is no gain in weight and in the autumn, as a trial measure, glucose was added to the dietary of 15 specially retarded children, being given in the form of Glucose D in quantities of half-an-ounce twice daily for a period of four weeks, with the result that at the end of the period, in every case there was a gain in weight amounting on the average to 24 ounces, as compared with an average loss of 5 ounces in weight during the preceding six months. The results justify a further trial and it is possible that the same benefits would follow the use of a less expensive form of sugar than Glucose D.

Special School for the Feeble-minded.—The number of children in attendance at the Day School for the feeble-minded at the end of the year was 35 (23 boys and 12 girls). The majority of these children were of relatively low grade but all are capable of deriving benefit from the instruction given them and show considerable improvement as the result of the training and dis-The premises, as has been mentioned in previous reports are not altogether suitable for the purpose. The children who are unable to return to their homes at mid-day are provided with a hot meal in a room adjoining the school, and this obviates one of the disadvantages which formerly attended the use of the premises not structually adopted for use as a School for the feebleminded. The lack of a separate playground and of facilities for lessons in gardening, interferes with the efficiency of the school, as also does the inadequacy of the facilities available for instruction in wood-work, cooking and laundry. The practice of not admitting to the Special School children who are of high grade has been continued, these children being retained in the ordinary schools and being given as much individual instruction as possible.

XII. Co-operation of Parents.—The percentages of parents who accept the invitation to be present at the routine medical inspections do not materially differ from year to year. During 1933 the percentages were as follows:—

				Perc	entages o	f parents present	
					Boys.	Girls.	
Entrants	• • •	• • •	 	•••	84.6	87.9	
Intermediate	s	• • •	 • • •		80.9	74.1	
Leavers			 		52.6	56.9	

XIII. Provision of Meals.—In addition to the meals provided at the Open Air School and the Special School for feeble-minded children, 67 necessitous children were provided with dinners by the Education Committee at catering establishments as near as possible to their school area. In addition, on the advice of the Medical Officers, 39 children were given milk at school, 89 received Oil and Malt, 15 Parrish's Food and one Virol.

XIV. EMPLOYMENT OF CHILDREN.—During the year 162 boys were examined as to their fitness for juvenile employment. All were found to be fit and the necessary certificates granted. Two girls were examined as to their fitness to take part in theatrical performances, the necessary certificates being granted.

XV. Secondary Schools.—These schools were visited for routine medical inspection as under:—

	Months.	No. of Sessions.
Southend High School for Boys.	March.	9
Southend High School for Girls.	March, July & October.	17
Westcliff High School for Boys.	July & October.	16
Westcliff High School for Girls.	April & October	16
Day Technical and Commercial School—Boys.	May.	2
Day Technical and Commercial School—Girls.	May.	2
School of Arts & Crafts—Boys.	March.	2
do. —Girls.	March.	2
Total		66

The total number of pupils subjected to routine medical inspection was 1,190, of whom 637 were boys and 553 girls. In addition 303 pupils (123 boys, 180 girls) were examined as specials for suspected illness or defect, whilst 997 (335 boys, 662 girls) were re-examined. The total number of medical inspections was consequently 2,490 as compared with 3,161 in 1932 and 2,947 in 1931. Pupils are routinely medically inspected on entrance to a Secondary School and in the year during which they are due to leave the Secondary School; they are also routinely medically inspected each alternate year whilst at the Secondary School, any pupil not due for routine medical inspection in any year being examined as a special if there is any indication that such is advisable.

The percentage of pupils, viz., 8.8, found at routine medical inspection to require treatment for one or more defects shows a marked diminution on the figures in recent years, viz.:— 13.9 in 1932, 13.3 in 1931, and 10.0 in 1930, but this is mainly accounted for by the fewer instances of round shoulders, postural spinal curvature, flat foot, and similar deformities which were noted as requiring treatment. Apart from this, the defects noted were of the same type and frequency as in previous years. The number of pupils referred for refraction on account of defective vision was 78, many of whom at their examination as entrants were found to have more or less normal vision, the deterioration being apparently due to the eye strain involved by the intensive study associated with secondary education.

Parents and pupils continue to take an interest in the results of the medical inspection and this is more particularly noticeable in the case of the older boys during their examination as leavers, many of whom produce for the Medical Officer's inspection a schedule giving the standard of medical fitness required by the Company or Firm into whose employment they hope to enter. The lack of care of the teeth is still the outstanding feature revealed by medical inspection, though the increasing frequency with which commercial companies and large firms require candidates for employment to pass an examination by the firm's own doctor as to medical fitness is already having a good effect in this connection.

Only one pupil was found to have organic heart disease but disorders of the heart not uncommon in adolescents were noted in 28 pupils, all of whom were suitably advised, care being taken not to deprive them unnecessarily of reasonable indulgence in games and active exercises.

### Elementary Schools.

RETURN OF MEDICAL INSPECTIONS.

1st January, 1933 to 31st December, 1933.

### TABLE I.

### A.-Routine Medical Inspections.

Number of Code Group Inspections:—

Entrants	•••	•••	•••	•••	•••	•••	•••	1,350
Intermediates	s	• • •	•••	•••	•••	•••	•••	886
Leavers	• • •	•••	•••	•••	• • •			1,474
					r.	Γotal	•••	3,710
Number of o	ther	Routine	Inspe	ections	•••	•••	•••	469
B	C	ther	Ins	pect	ions	•		
Number of S	Speci	al Inspe	ection	S		•••	•••	5,400
Number of Re	e-insp	pections	•••	•••	•••	•••	•••	7,990
					7	Γotal	•••	13,390

<sup>\*</sup>All newcomers to Council Schools in the Borough were routinely inspected. Newcomers aged 8, but under 9, on the 1st January, and aged 12 or ever, were grouped as "intermediates" and "leavers" respectively; newcomers aged 5 or aged 6 were included among the "entrants," other newcomers were included in "other routine inspections."

### TABLE II.

### A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR.

					Inspe	itine ctions. Defects	Spe Inspec No. of I	
					Requiring treatment	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Malnutrition				• •	• •	11	14	6
Skin Scabies Impetigo Other L	Scalp Body	··· ··· ··· Fubercu	  lous)	••	1 1 7 7		2 24 47 365 238	5
Defective Squint	tivitis	ing squi	  (nt)		5 3  248 32 3	2   58 6 9	26 60 1 1 316 34 84	18
Ear { Defectiv Otitis M Other Ea	e Hearing edia ir Diseases	•••	•••	••	1 12 9	7	3 77 84	5 29
Nose and Adenoid	Tonsilitis and A		••	••	17 20 47 12	174 35 26 44	48 32 182 213	16 13 17 66
Enlarged Cervical Gland	ds (Non-Tubero	culous)	• •	• •	2	9	38	25
Defective Speech		••			• •	3		• •
Heart and Circulation Heart I	Disease:— Organic Functional	• •		• •	1 13	16 33 13	3 1 32	1 9 2

### TABLE II.—continued.

					Insp	utine ections Defects	Spe Inspe No. of	ctions
					Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
Lungs	Bronchitis Other Non-Tuberculous	s Disea	 ises		18	13 14	52 72	6 11
	Pulmonary :— Definite Suspected	••	••	••	••	••	· · · · · · · · · · · · · · · · · · ·	• •
Tubercu { losis	Non-pulmonary:— Glands Bones and Join Skin Other Forms	its	••	• •		1 4 	2 2 ··· 2	i
Nervous { System {	Epilepsy Chorea Other conditions	•••	••	••	2	 4 10	2 8 12	6 7
Deform {	Rickets Spinal Curvature Other Forms	•••	••	••	 3 14	1 24	2 3 7	· i 1 1
Other Defects a Dental Di	and Diseases (excluding Useases)		liness ••	and	59	166	1,214	778

TABLE II.—continued.

### B. NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT.

(excluding Uncleanliness and Dental Diseases).

	Number o			
GROUP	Inspected	Found to require treatment	Percentage of children found to require treatment	
Code Groups :				
Entrants	1350	115	8.5	
Intermediates	886	97	10.9	
Leavers	1474	128	8.6	
Total (Code Groups)	3710	340	9.1	
Other Routine Inspections	469	61	13.0	

### TABLE III.

### RETURN OF EXCEPTIONAL CHILDREN IN THE AREA.

Children	suffering	from	Multiple	Defects	• • •	• • •	•••	3

### BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
10	_	_	_	10

### PARTIALLY BLIND CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
-	_	15	_	*******	15

### DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
4	2			6

### PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
_		6		- 1	6

### MENTALLY DEFECTIVE CHILDREN.

### FEEBLE-MINDED.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
38	13	7	10	68

### EPILEPTIC CHILDREN.

### SUFFERING FROM SEVERE EPILEPSY.

At Certified Special. Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	3	_	3	8

### PHYSICALLY DEFECTIVE CHILDREN.

### A.—TUBERCULOUS CHILDREN.

### PULMONARY TUBERCULOSIS.

At Certified Special. Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
2	4	2	- 1	8

### NON-PULMONARY TUBERCULOSIS.

At Certified Special. Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
13	28	1	1	43

### B. DELICATE CHILDREN.

At Certified Special. Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
80	9	-	1	90

### C. CRIPPLED CHILDREN.

At Certified Special. Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
8	28	3	8	47

### D. CHILDREN WITH HEART DISEASE.

At Certified Special. Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	TOTAL.
	7	_	3	10

### TABLE IV.

### RETURN OF DEFECTS TREATED DURING THE YEAR.

### TREATMENT TABLE.

### GROUP I.

MINOR AILMENTS (excluding Uncleanliness, for which see Group V.).

	Number of Defects treated, or under treatment, during the year			
Disease or Defect	Under the Authority's Scheme	Otherwise	Total	
1	2	3	4	
Skin— Ringworm :—				
Scalp	• •	2	2	
Body	2	22	24	
Scabies	3	45	48	
Impetigo	100	272	372	
Other Skin Diseases	<b>2</b> 9	216	245	
Minor Eye Defects— (External and other but excluding cases falling in Group II).	28	60	88	
g 000ap 22/				
Minor Ear Defects—	78	105	183	
Miscellaneous— (e.g. minor injuries,	•		4	
bruises, sores, chil- blains, &c.)	206	542	748	
Total	446	1264	1710	

TABLE IV.—continued.

### GROUP II.

### DEFECTIVE VISION AND SQUINT.

(Excluding Minor Eye Defects treated as Minor Ailment-Group I).

	No. of Defects dealt with				
Defect or Disease	Under the Authority's Scheme	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme	Otherwise	Total	
Errors of Refraction (including squint)	540	1	• •	541	
Other Defects or Disease of the eyes (excluding those recorded in Group I)	17	••		17	
Total	557	1		558	

	(a)	Under the	Authority'	s Sche	me	• • •		413					
	(b)	Otherwise	•••	••	•••	•••	•••	. 1					
Total numb		children wh				specta	cles:—	*370					

TABLE IV.—continued.

GROUP III.

TREATMENT OF DEFECTS OF NOSE AND THROAT.

	Total numbe treated.	217				
	Received other forms of treatment.		48			
		(IV).	:			
	Total.	$(III) \mid (IV). \mid (I). \mid (II). \mid (IV).$	6 158			
	To	(II).	9			
		(I).	2			
atment.	tal me.	(IV).	:			
Received Operative Treatment.	By Private Practitioner or Hospital apart from the Authorities' Scheme.	(III)	3	-		
Operat	By Privatitioner or apart fro Authorities'	(II).	-			
ceived	B titi Au	(I).	-			
Re	ic,	(IV).	:			
1	Under the Authority's Scheme, in Clinic or Hospital.	(I).     (II).     (IV).  (IV).  (II).  (II).	5 155			
	ler the cheme, or Ho	(II).	10			
	Unc	(E)	4			

(III). Tonsils and Adenoids. y. (II). Adenoids only. (III). Tonsils (IV). Other defects of the Nose and Throat. (I). Tonsils only.

ELEMENTARY SCHOOLS.

TABLE IV.—continued.

### GROUP IV.

# ORTHOPAEDIC AND POSTURAL DEFECTS.

Total number treated.						
	Non- I residential treatment. at an orthopaedic Clinic.	12				
Otherwise,	Residentia treatment. without education.	c1				
	Residential treatment. with education.					
Scheme.	Non- residential treatment. at an orthopaedic Clinic.					
Under the Authority's Scheme.	Residential treatment. without education.					
Under th	Residential reatment.  with with education.					
		Number of children treaeted.				

### TABLE IV.

### GROUP V.

### DENTAL DEFECTS.

		DENTA	L DEALE		S.				
(1)	Number of children v	who were-	-						
	(a) Inspected	by the De	entist:						
			Ag	ged.		R	outir	ne age	Groups.
			,		• • • • • • • • • • • • • • • • • • • •				
				6	• • • • • • • •				
				7	• • • • • • • • • • • • • • • • • • • •	• • • • • • • •	• • • • • •	• • • • • • • • • • • • • • • • • • • •	. 1053
				8	• • • • • • • • •	• • • • • • • • •	• • • • • •	• • • • • • • • • •	. 1121
	Routine Age Group	NG.	1	9	•••••			**	
	Routine Age Oroup	,	1		•••••				
				11		•••••			
				$\frac{12}{13}$	• • • • • • • • • • • • • • • • • • • •				
						•••••			
				T.26	• • • • • • • • •			• • • • • • • • • • • • • • • • • • • •	
					Ç.				
					O.F	ecrais	treat	.ea	. 1217*
						Grand	tota	1	11,109
	(b) Found t	o require	treatmen	t.					5,591
	(c) Actually		•••		•••	• • •			3,165
							• • •	• • •	0,100
		Included	m nume	61	rreated	.*			
(2)	Half-days devoted to-							20	
	- '	•••		• • •	•••	•••	• • •	69	
	Treatment	•••	***	•••	•••	•••	• • •	829	898
(3)	Attendances made by	children f	or treatn	nen	t		•••	• • •	5138
(4)	Fillings								
(4)	Fillings— Permanent Te	eeth						1 145	
	Temporary Temporary	eetn	•••	• •	•••	• • •	• • •		1,520
(5)	Extractions—								1,020
(3)	Permanent Te	eeth		• •		• • •	•••	1,007	
	Temporary Te							5,254	
	Tomporary 1								6,261
(6)	Administrations of gen	neral anaes	sthetics fo	or e	xtracti	ons	• •		122
(7)	Other operations	• • •	•••		•••	•••	• •	• • •	160

### TABLE IV.—continued.

### GROUP IV.

### UNCLEANLINESS AND VERMINOUS CONDITIONS.

9.2			_				-		Averaged nut	(1)
32,907		_			· ·				Total numbe School N	(2)
259	•••		•••	un	uncle	found	children	ndividua	Number of in	(3)
125		_		_					Number of o	(4)
		ı :—	taker	gs were	cedin	al pro	hich leg	cases in	Number of o	(5)
_	•••	•••	•••	1	et, 192	ion A	e Educat	Under the	(a)	
4				elaws	ce. By	tendan	chool At	Under S	(b)	

# MENTAL DEFICIENCY (NOTIFICATION OF CHILDREN) REGULATIONS, 1928.

Statement of the number of children notified during the year ended 31st December, 1933, by the Local Education Authority to the Local Mental Deficiency Authority.

Total number of children notified ... 2

#### ANALYSIS OF ABOVE TOTAL.

	Diagnosis.	Boys	Girls
1.	(1) Children incapable of receiving benefit from instruction in a Special School:—		
	(a) Idiots	• •	• •
	(2) Children unable to be instructed in a Special School without detriment to the interests of other children		
	(a) Moral defectives (b) Others	• •	• •
2.	Feeble-minded children notified on leaving Special School on or before attaining the age of 16	1	1
3.	Feeble-minded children notified under Article 3, i.e., "special circumstances" cases		• •
4.	Children who in addition to being mentally defective were blind or deaf	• •	• •
	Grand Total	1	1

#### Secondary Schools.

#### RETURN OF MEDICAL INSPECTION.

1st January, 1933 to 31st December, 1933.

#### TABLE I.

#### A.—Routine Medical Inspections.

J					Boys.	Girls.	Total.
Entrants	•••	•••	•••	•••	160	246	406
Intermediates		•••	• • •	• • •	296	200	496
Leavers	•••	•••	•••	• • •	181	107	<b>2</b> 88
						All and the second second	
		Γ	`otal	•••	637	553	1190

#### B.—Other Inspections.

J			Boys.	Girls.	Total.
Special Inspections		•••	123	180	303
Re-inspections		•••	335	662	997
	Tot	al	458	842	1300
				-	-

#### TABLE II.

### A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR.

	Rou	itine ections	Spe Inspec	cial ctions
	No. of	Defects	No. of	Defects
	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Malnutrition		• •	1	• •
Uncleanliness —see Table IV Group V	••	• •	• •	
Ringworm :—   Scalp       Scalp       Scabies       Impetigo       Other Diseases (Non-Tuberculous)	3		3 3	3
Eye  Blepharitis	78 2 3	1  30 	1 3  83 1 2	
Ear { Defective Hearing	1 2	1 3	1 1	• •
Nose and   Enlarged Tonsils only	3 1 	17 2 2 4	··· 2 1	i i
Enlarged Cervical Glands (Non-Tuberculous)		4	1	• •
Defective Speech		• •		• •
Heart and	7	1 28 4	••	i

#### TABLE II.—continued.

						1	
				Inspe	utine ections Defects	Spe Inspec	ctions
				Required treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Lungs	Bronchitis Other Non-Tuberculou	 ıs Disease	· · · · · · · · · · · · · · · · · · ·	2	1		• •
Tubercu- losis	Pulmonary:— Definite Suspected Non-pulmonary:— Glands Spine Hip Other Bones a Skin Other Forms	nd Joints		•••		i :: :: ::	•••
Nervous System	Epilepsy Chorea Other conditions	•••••		• •	i 1	• •	• •
Deformities	Rickets Spinal Curvature Other Forms			18 20	 1 9	· · · · · · · · · · · · · · · · · · ·	• •
	and Diseases			13	36	59	27

TABLE II—continued.

## B. NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSFECTION TO REQUIRE TREATMENT.

(excluding Uncleanliness and Dental Disease).

	Number	of Children		
GROUP	Inspected	Found to require treatment	Percentage of children found to require treatment	
Entrants	406	31	7.6	
Intermediates	496	49	9.8	
Leavers	288	26	9.0	
Total	1190	106	8.8	

#### TABLE IV.

## RETURN OF DEFECTS TREATED DURING THE YEAR. TREATMENT TABLE.

GROUP I.

MINOR AILMENTS (excluding Uncleanliness, for which see Group V.)

	Number of Defe	ects treated, or und	ler treatment
Disease or Defect	Under the Authority's Scheme	Otherwise	Total
Skin— Ringworm :— Scalp		••	• •
Body	••	••	• •
Scabies	• •		• •
Impetigo		3	3
Other Skin Diseases		6	6 -
Minor Eye Defects— (External and other but excluding cases falling in Group II.)	••		• •
Minor Ear Defects—	••	••	• •
Miscellaneous— (e.g. minor injuries, bruises, sores, chil- blains, &c.)	1	3	4
Total	1	12	13

#### TABLE IV.—continued.

#### GROUP II.

#### DEFECTIVE VISION AND SQUINT.

(excluding Minor Eye Defects treated as Minor Ailments—Group I.)

		No. of defects	dealt with	
Defect or Disease	Under the Authority's Scheme	Submitted to refraction by private practitioner or at hospital apart from the Authority's Scheme	Otherwise	Total
Errors of Refraction (including squint)	136	11	• •	147
Other Defects or Disease of the eyes (excluding those recorded in Group I)	2	••	• •	2
Total	138	11	• •	149

Γotal r	numb	er of	childre	en for	whom	spec	tacles	were	prescri	bed :—
	(a)	Und	er the	Autho	rity's	Schen	me	• • •	* * *	108
	(b)	Othe	rwise		•••	•••	•••	•••	•••	11
Total r	umb	er of	childre	en who	obta	ined o	or rec	eived	spectacl	les :—
	(a)	Und	er the	Autho	rity's	Schen	me	•••	•••	103
	(b)	Othe	rwise	•••	•••	• • •	• • •	• • •	•••	11

TABLE IV.—continued

GROUP III.

TREATMENT OF DEFECTS OF NOSE AND THROAT.

	Total number Treated.		2	
	Received other forms of Treatment.		:	
		(IV).	•	
	ial.	(II). (III). (IV).		
	Total.	(II).	:	
t.		(IV). (I).	_	
Treatment.	fal	(IV).	:	
	te Prac Hospi om the	(III).	:	
Received Operative	By Private Practitioner or Hospital apart from the Authorities' Scheme.	(II).	:	
ceived	By titio	(I).	_	
Ř	ty's	(IV).		
	Authori n Clini spital.	(III).	-	
	Under the Authority's Scheme in Clinic or Hospital.	(I). $\left  \text{ (II). } \right  \text{ (III). } \left  \text{ (IV). } \right  \text{ (I). } \left  \text{ (II). } \right  \text{ (III). }$	:	
	Ond	(I).	:	17

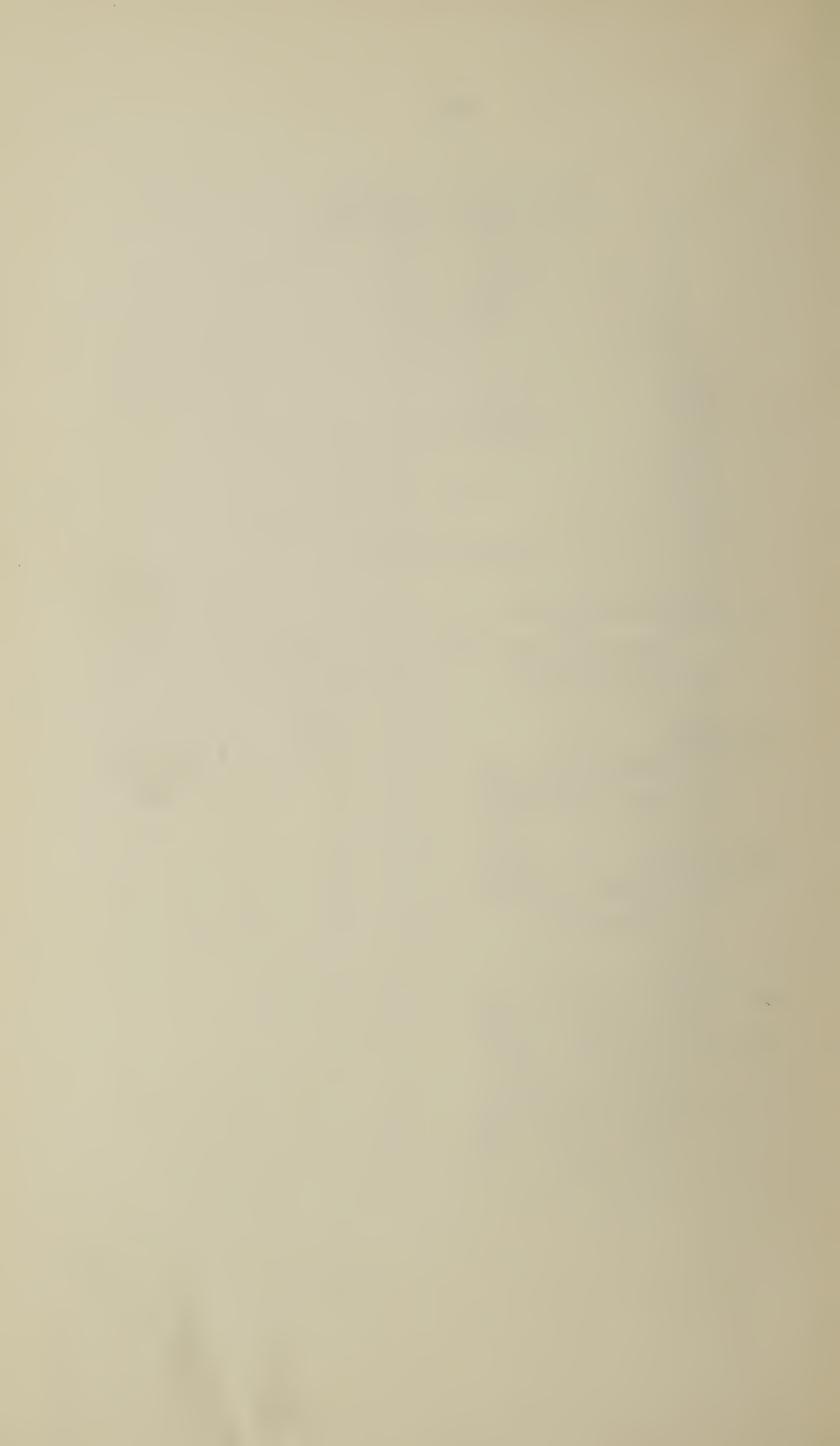
(I). Tonsils only. (II). Adenoids only. (III) Tonsils and Adenoids. (IV). Other defects to the Nose and Throat.

TABLE IV.

GROUP IV.

#### DENTAL DEFECTS.

(1)	Number of pupils who we	ere:—							
	(a) Inspected by	the De	entīst	• • •	• • •				Nil.
	(b) Actually treate	ed	•••	•••	• • •	•••	• • •	• • •	52
(2)	Fillings—								
	Permanent Teeth						•		50
	Temporary Teeth	• • •	• • •	•••	• • •	* * *	• • •	•••	N11.
(3)	Extractions—								
	Permanent Teeth				• • •	• • •	• • •		49
	Temporary Teeth			• • •	• • •	• • •		•••	9
									58
(4)	Administrations of genera	ıl anac	estheti	cs for	extra	ctions	•••	•••	7
(5)	Other operations—								
	Permanent Teeth	•••	• • •			• • •			13
	Temporary Teeth		• • •	•••	• • •	• • •	• • •	• • •	Nil.



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Notification of Births Act, 1921

Milk for Mothers and Children

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